



## KANSAS DEPARTMENT FOR CHILDREN AND FAMILIES

# PREVENTION AND PROTECTION SERVICES

### Handbook of Services

Updated 01/01/2013

## **Introduction**

The Handbook of Services (referred to as the “Handbook”) is a listing of services available to family service, family preservation, and foster care clients. Services provided by case management contractors are listed in the Handbook as the responsibility of the contractors. Some of these same services can also be purchased by the Department for Children and Families (DCF) through a family service, independent living, or investigative case.

For DCF purchases, the Handbook contains services which are most typically provided to families. The Handbook service pages provide information regarding whether a Provider Agreement is required or whether it can be provided with a Client Service Agreement (CSA) only. If the service page indicates a provider agreement is required, a provider agreement must be in place at the time the service is purchased. Whether or not the service is in the Handbook, a Client Service Agreement is required for any client purchase. (Refer to section D of this Introduction regarding services not in the Handbook.)

### **A. Provider Agreements - General**

A Provider Agreement is an agreement between the provider and DCF for specific services offered to families and children. It is a general agreement, not specific to any particular family or child. The development of a Provider Agreement may be initiated either by a service provider or by the regional DCF office. Once a Provider agreement is finalized, the services may be accessed by all DCF offices in the State, at the locations indicated on the Provider Agreement.

1. General rules regarding the creation of provider agreements are:
  - a. DCF may create agreements with qualified providers based on client need.
  - b. DCF does not promise any certain number of referrals.
  - c. Provider may be profit or non-profit, public or private.
  - d. Providers agree to provide services for DCF clients at an agreed upon rate.
  - e. Each Provider Agreement should have a start and end date involving a five year period.
2. Following are web sites with more information about Provider Agreements.
  - a. Operations, a division of DCF, is the agency’s contracts and grants governing agency. Although agencies are granted authority to determine

their own policies regarding client purchases, Operations acts as the central agency for gathering information regarding provider agreements. Information about Provider Agreements can be found on Operations' web site:

[Operations Provider Agreement site](#)

This site contains the following useful documents:

- i. Developing a Provider Agreement – instructions to regional office contacts regarding new provider agreements;
  - ii. Provider Agreement Packet – contains all forms needed to complete a provider agreement;
  - iii. Provider Agreement Instructions;
  - iv. Local Service Agreement – a part of the Provider Agreement Packet;
  - v. Vendor Packet – Important information to vendors concerning contracting with DCF;
  - vi. Provider Agreement Worksheet – the document sent to Operations so the provider database can be updated.
- b. Additional information about Provider Agreements, including regional office responsibilities for creating and maintaining provider agreements, can be found in Operations [Administrative Procedural Manual – Provider Agreement Manual](#) .
- c. Each regional office has staff dedicated to obtaining and maintaining provider agreements. A list of that staff can be found at: [Procurement Services-Provider Agreements](#), and click on “Regional Office Contacts”.

## **B. Provider Agreements – Placement Services**

### **1. Family Foster Homes**

Provider Agreements do not need to be completed for Child Placing Agency family foster homes. Child Placing Agency family foster homes are licensed by KDHE, as is the Child Placing Agency. Family foster homes are providing family foster care (food, clothing, shelter) but not a set of services that would determine a differential reimbursement rate from home to home.

### **2. Residential Placement Services**

Provider Agreements shall be completed for the following residential placement services:

- a. Community Integration Program
- b. Emergency Shelters
- c. Residential Maternity Homes
- d. Secure Care Programs
- e. Transitional Living Programs
- f. Youth Residential Center I
- g. Youth Residential Center II

Provider Agreements for residential placement services shall be considered to be statewide agreements that are developed and managed in the region where the facility's corporate office is located. Where there are multiple site providers, one provider agreement shall be completed for the organization at the location where the corporate office is located. For further guidance on monitoring residential placements, see PPM section 8400.

A provider Agreement does not need to be completed by the DCF regional office if the residential placement serves only JJA youth. JJA will do a provider agreement for that facility.

While KDHE licenses the Residential Program they do not establish a level of care, type of care or outline the services that are provided by the facility. DCF outlines the services that are to be provided by the facility in the Provider Agreement.

### **C. Provider Agreements – Modifying/Renewing a Provider Agreement**

A Provider Agreement can be modified at the request of DCF or the provider.

1. To delete a service, line through (strikeout) the service, initial and date the change.
2. To add a service, complete a new Local Service Agreement; DCF and the provider should initial and date the change. Send a copy to the provider.
3. A copy of the Provider Agreement Worksheet shall be sent to central office procurement services any time a Provider Agreement is modified or renewed.
4. Monitoring visits to renew a Provider Agreement for services included in the Handbook of Services are at the option/discretion of the Regional Office and their local policies.

5. While monitoring visits are at the discretion of the Regional Office, it is suggested that once a year a paper review be completed to determine if there have been substantial changes that would affect use of that provider.
6. Monitoring visits to renew or update a Provider Agreement for residential placement services shall be completed by the Regional Office. Monitoring visits may be conducted in coordination with the Juvenile Justice Authority if the provider serves both CINC and JO populations. (See PPM Section 8400 for more information.)

#### **D. Client Service Agreements**

A Client Service Agreement (CSA) is a three-way contract between the client, the provider, and DCF. A Client Service Agreement is required for all services found in the Handbook as well as those needed but not in the Handbook. The CSA also serves as a promise with the provider that DCF will purchase a specific service for a set frequency, rate, and length of time.

The Client Service Agreement shall be completed and signed by the DCF worker and the provider prior to, or at the same time, the approved services begin. Signature of the provider is not required when:

1. Purchasing a good; or
2. Purchasing a service not in the Handbook; or
3. Any time it is in the best interest of the client, for confidentiality reasons, that the provider not see the CSA.

The DCF Client Service Agreement form, PPS 2833, and instructions can be found in the PPM Forms and Appendices section.

#### **E. Placement Agreements**

Placement Agreements are no longer needed by DCF staff. When placing a child the following pertains:

1. Children in DCF Custody  
Children in DCF Custody and referred to the Child Welfare Contract Management Provider (CWCMP), shall have their Placement Agreement executed between the CWCMP and the placement provider. CWCMPs have created their own Placement Agreement forms.

2. Children Not in DCF Custody

Children not in DCF custody and in need of out-of-home placement shall have a Placement Agreement executed between the placement provider and the parent or guardian of the child. DCF is not a party to parental placement agreements. The placement agreement shall be supplied by the placement provider.

**F. Services Not in the Handbook**

Services not listed in the Handbook may be purchased using a Client Service Agreement (see PPM section 4902 for more information on CSAs). The following guidelines apply:

1. The service is provided by someone who normally performs this service in the community.
2. Payment is limited to \$1,000 per service, per client, per 365-day period.
3. All services shall be provided at usual and customary rates unless other limitations exist.
4. Any local procedures shall be followed when seeking approval to purchase a service not in the Handbook.

If a region finds they need this service regularly (on a monthly or more often basis) it can be added to the Handbook.

**G. Adding a Service to the Handbook**

When a region finds they are regularly purchasing (on a monthly or more often basis) a service that is not in the Handbook they can notify central office's Handbook of Services Coordinator. Information about the service will be collected and a draft service page will be created and presented to the Policy Workgroup for consideration.

**H. General Guidelines for Client Purchases**

Purchases for clients have different rules than those the Department of Administration (DofA) has imposed on purchases for agencies. DofA has given purchasing authority to local agencies to purchase goods and services for staff without a formal contract if the purchasing amount is under \$5,000. This limit does NOT apply to client purchases. Following are general "truths" regarding purchasing goods and services for clients.

1. Services in our Handbook of Services must adhere to limitations and guidelines listed in the Handbook; the "under \$5,000" purchasing authority limit does NOT apply here.

2. Services NOT in our Handbook of Services must adhere to CFS guidelines (see PPM section 4901).
3. A Provider Agreement is needed for any service marked in the Handbook as needing a provider agreement; services not in the Handbook do not require a provider agreement.
4. A Client Service Agreement is needed for all services purchased, regardless of whether they are listed in the Handbook or not.
5. A service can be added to the Handbook if it is regularly used. *Regularly* is defined as “on a monthly, or more often, basis.”

**SERVICES**  
**TABLE OF CONTENTS**  
(listed in alphabetical order)

Child/Youth Mentorship .....	10
Child Abuse Pediatric Specialty Evaluation.....	12
Child Care .....	13
Clothing Allowance .....	14
Counseling.....	15
Extraordinary Maintenance Expenses .....	17
Family Financial Assistance .....	18
Family Reunification Assistance .....	19
Family Support Services .....	20
Foster Care Transition Support.....	22
Home Study-Adoption .....	23
Home Study-General.....	25
In-Home Family Treatment.....	27
Independent Living Services .....	29
Job Readiness Training .....	31
Mediation Services.....	33
Non-Medical Transportation.....	35
Parent/Child Interaction .....	37
Parenting Assessment .....	39
Parenting Education .....	41
Partial-Day Social/Educational Services .....	43
Placements	
AWOL .....	45



Children’s Residential Services – MR/DD Waiver .....	46
Community Integration program (CIP).....	48
Correctional Facility.....	51
Emergency Family Foster Home.....	52
Emergency Shelters (ES).....	54
Family Foster Home .....	57
Job Corps .....	59
Kinship/Non-Related Kin Care .....	60
Maternity Foster Home .....	63
Medicaid Paid.....	65
Pre-Adoptive Placement.....	66
Relative Foster Home.....	67
Residential Maternity Care (RMC).....	69
Satellite Foster Home .....	71
Secure Care (SC) .....	73
Specialized Family Foster Home .....	76
Therapeutic Foster Home .....	78
Transitional Living Program (TLP) .....	82
Youth Residential Care I (YRCI).....	86
Youth Residential Care II (YRCII).....	88
Psychological Testing .....	91
Respite Care .....	92
Service Coordination-Family Service.....	93
Worker/Child Visits .....	95
Footnote Key .....	97

## CHILD/YOUTH MENTORSHIP

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
X	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> • in-home • out-of-home services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF004 Individual</b> <b>CF004.1 Group</b>	

### Definition

Community-based support services to children and youth under 15 years of age. Support services are provided to the client individually, as well as in group meetings, to assist him/her to stay within the law; have successful school/vocational experience; have positive interaction with family, peers, community and employers; develop a healthy lifestyle and positive self-esteem; obtain life skills; understand and respect cultural difference; and stop the cycle of abuse/neglect and become capable, nurturing spouses and parents when ready and planned.

These same services are provided for those age 15 and over through the Independent Living program. If the client is receiving these services through Independent Living, CWCBS contractors do not submit an encounter; tracking of Independent Living services is done through the Random Moment Time Study and in FACTS through the case plan.

### Provider Minimum Qualifications

Individual providers of this service must, at minimum, meet the following qualifications:

- Bachelor's Degree from a four-year college in the area of human services or two years of experience in working with youth as documented on a resume and/or letter(s) of reference;
- Be at least 21 years of age with a minimum of three years age span between worker and client;
- Letter(s) of reference noting a demonstrated ability to teach, be a positive role model, and to work well with other members of the team, i.e., parents or other care givers, social workers, law enforcement, court services staff, school personnel, etc.;
- Possess valid driver's license and necessary automobile insurance, for client transportation,
- Negative TB skin test; and,
- Pass KBI, DCF Child Abuse Check, Adult Abuse Registry and Motor Vehicle screens.

### Duties

Each service provider shall perform, at minimum, the following duties:

- Participate as a team member in DCF case planning of mentor services and program;
- Limit group size to no more than 15 clients when service is delivered in a group;
- Monitor compliance with curfew, attendance at school, work, AA meetings, etc.;

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

- Counsel to assist youth in establishing and maintaining a behavioral contract;
- Role model healthy interactions and relationships;
- Teach life and/or parenting skills;
- Facilitate support group meetings and recreational activities;
- Involve youth in positive cultural experience;
- Assist with school activities and issues;
- Locate and encourage use of community resources; and,
- Transport, as needed, to participation in other support services. Written parental permission needed to transport non-custody youth.

**Documentation**

Each service provider shall maintain, at minimum, a daily contact log for each client which includes:

- Description of the service provided,
- Date and time the service was provided,
- Where the service was provided,
- Total time spent providing the service,
- Name of the support worker providing the service, and
- Written reports outlining the client's progress and other recommendations will be submitted within the time frames as specified in the Case Plan.

**Limitations**

As described in the Case Plan or Client Service Agreement.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$15/hour - individuals \$5/hour/person - groups CWCMP: report actual cost as "line charge" in encounter data.	SGF, TANF

## CHILD ABUSE PEDIATRIC SPECIALTY EVALUATION

<b><u>DCF Purchased Service</u></b>		<b><u>CWCMP Contract Provided Service</u></b>	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

Child Abuse Pediatrics is an emerging sub-specialty recently recognized by the American Board of Medical Specialties. The first certification exam occurred in 2009. The need for the subspecialty arises due to the commonality of child abuse and the difficulty in providing an accurate diagnosis for child protective workers. The evaluation process may consist of phone consultation, case review, or a complete child physical examination.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Certified as a Child Abuse Pediatrician

### **Duties**

Services shall fall within the following duties as appropriate:

- Provide phone consultation to DCF CFS social workers regarding injury and explanation.
- Conduct case reviews and provide an opinion to the DCF CFS social worker.
- Complete Pediatric Child Abuse exam and provide diagnosis to DCF CFS social worker.

### **Documentation**

Each provider shall maintain a contact log consistent with their organization's requirements for each client, record of duration of service, and written progress reports with recommendations or findings relative to the service provided.

### **Limitations**

None; approximate hours purchased typically falls between 1-5 hours.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
Per consultation	\$150.00 per hour	Family Service Funds

## CHILD CARE

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF042 – hourly</b> <b>CF042.1 – daily</b> <b>CF042.2 – weekly</b> <b>CF042.3 – monthly</b> <b>CF042.4 – registration fees</b>	

### Definition

Child care services, for foster parents, provided outside the home. Child care may be provided for hours of employment/school and travel time between the child care site and employment/school site. This service is also provided while foster parents attend required training, and administrative case or judicial reviews.

### Provider Minimum Qualifications

Providers of this service must, at minimum, meeting the following qualifications:

- KDHE Licensed & Registered Child Care Providers

### Duties

Duties or activities performed by the service provider include but are not limited to:

- Provide child care in a licensed child care setting.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

- Description of the service provided,
- Date the service was provided,
- Where the service was performed, and
- Name and type of vendor providing the service.

### Limitations

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	varies CWCMP: report actual cost as “line charge” in encounter data.	Title IV-E Maint. TANF

## CLOTHING ALLOWANCE

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	Provider Agreement Required for DCF to purchase	X	Responsibility of CWCMP Contracts <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	DCF can purchase without PA; CSA required		Provider Agreement Required for residential rate sheet <sup>1</sup>
		for encounter data report: CF044	

### Definition

Clothing to meet the needs of the child. Clothing expenditures shall be reported when not included in the daily rate for the client's placement.

### Provider Minimum Qualifications

Not applicable

### Duties

Provide needed and necessary clothing and document as described below.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

- Description of the purchase,
- Date the purchase was made,
- Cost of clothing purchased, and
- Name of the vendor from whom the purchase was made.

### Limitations

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
each	varies CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint.

## COUNSELING

<b><u>DCF Purchased Service</u></b>		<b><u>CWCMP Contract Provided Service</u></b>	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

Counseling interventions delivered to families or individuals, including children, in a group, family or individual setting. May be directed to, but is not necessarily limited to, adjustment to recent changes in status or circumstances, work on interpersonal relationships, work on family relationships including intergenerational, work on relationships with authority figures, assisting in emotional growth, assisting with independent living issues, and changes in behaviors associated with truancy, substance abuse, delinquency, waywardness, abuse/neglect or gang influence.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Licensed Master's Degree Social Worker; or  
Licensed Clinical Specialist Social Worker; or  
Registered Master Level Psychologist; or  
Licensed Professional Counselor; or  
Registered Marriage and Family Therapist; or  
Bachelor's degree with two years experience and be supervised by someone with one of the above captioned licenses/registrations; AND
- Two years experience in family based service delivery, or two years experience being employed by a Licensed Child Placing Agency, a CMHC or a private mental health agency; AND
- Be licensed/registered with the Behavioral Sciences Regulatory Board.
- Pass KBI, DCF Child Abuse Check, Adult Abuse Registry and motor vehicle screens.

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- Clearly identify the questions and issues to be addressed consistent with the client goal (outcome) as per the Client Service Agreement,
- Describe the family or individual at time of referral,
- Submit written progress reports as per the Client Service Agreement,
- Include the interpretation of findings with impressions and observations,
- Give suggestions for case action and recommendations, and
- Illustrate the need for case actions/interventions as suggested/recommended.

**Documentation**

Each provider shall maintain, at minimum, the following documentation:

- Daily contact log for each client which includes description of the service provided, date and time service provided, total time spent providing the service, and family members participating in the service.
- Written progress reports outlining client's progress and other recommendations to be submitted within the time frame specified in the Client Service Agreement.

**Limitations**

Eight sessions. Assistant Regional Director or designee may approve additional sessions based on written justification from the counselor.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$30/hr/person - group \$80/hr - individual	Medical Card SGF



## EXTRAORDINARY MAINTENANCE EXPENSES

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
X	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF034</b>	

### **Definition**

Costs which are not included in the child's foster care maintenance rate, including athletic uniforms, driver's education, recreational supplies, summer day camp, etc. To report this service it must have been provided to the child.

### **Provider Minimum Qualifications**

Not applicable

### **Duties**

Provide needed and necessary items as documented on case plan or Client Service Agreement.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Description of the purchase,
- Date the purchase was made,
- Cost of the purchase, and
- Name of the vendor from whom the purchase was made.

### **Limitations**

Not applicable

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
each	varies CWCMP: report actual cost as "line charge" in encounter data.	TANF, SGF

## FAMILY FINANCIAL ASSISTANCE

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ● in-home    ○ out-of-home    services
X	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF020</b>	

### Definition

Financial assistance to support the needs of the family in preventing out-of-home placement of the child. Financial support may include utilities, rent, furniture, food, clothing, transportation, etc.

### Provider Minimum Qualifications

Not applicable.

### Duties

Provide needed and necessary clothing as documented on case plan or Client Service Agreement.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

- Description of the cash assistance,
- Date the cash assistance was provided,
- Amount of the cash assistance, and
- Name of the vendor to whom payment was made.

### Limitations

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
each	varies CWCMP: report actual cost as “line charge” in encounter data.	TANF

## FAMILY REUNIFICATION ASSISTANCE

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF023</b>	

### Definition

Cash assistance provided to support the needs of the family in reuniting and maintaining the child with his/her family. Financial support may include utilities, rent, furniture, food, clothing, transportation, etc. to allow child to return home.

Note: Clothing and transportation expenses directly for the client in foster care should be reported as CF044 (Clothing Allowance) and CF051 (Non-Medical Transportation).

### Provider Minimum Qualifications

Providers of this service must be employed, or be subcontracted with, one of our current CWCMP contract providers.

### Duties

Provide needed and necessary assistance as documented on case plan or Client Service Agreement.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

- Description of the cash assistance,
- Date the cash assistance was provided,
- Amount of the cash assistance, and
- Name of the vendor to whom payment was made.

### Limitations

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
each	varies CWCMP: report actual cost as “line charge” in encounter data.	TANF

## FAMILY SUPPORT SERVICES

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
X	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> • in-home    • out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF011</b>	

### Definition

Service provided to eligible families for the purpose of maintaining the child in his/her home or reuniting the child with his/her family. Services include, but are not limited to, teaching, modeling and demonstrating basic homemaking skills, parenting skills, positive interaction, and communication skills. Services may include tutoring. Services are delivered in the home or community according to the Case Plan or the Client Service Agreement.

### Provider Minimum Qualifications

Providers of this service must, at minimum, meet the following qualifications:

- Supervision of support workers will be provided by staff possessing a Human Services Degree with knowledge or experience in family preservation services, and
- Support workers hired by this agency to provide this service must meet the following qualifications:
  - Be at least 18 years of age with a minimum of three years age span between workers and clients,
  - High school diploma or equivalent,
  - Pass KBI, DCF Child Abuse Registry, Adult Abuse Registry, and Motor Vehicle screens,
  - Documentation showing training pertaining to the dynamics and indicators of child abuse/neglect,
  - Letter(s) of reference showing good communication skills, the ability to follow instructions, and the ability to listen and be non-judgmental,
  - Negative TB skin test, and
  - Possess valid driver's license and necessary automobile insurance.

### Duties

Duties or activities performed by the service provider include but are not limited to:

- Teach parenting skills through role modeling,
- Help client become networked in local community services,
- Teach parenting skills, home management, money management, meal planning, and food preparation,
- Teach child behavior management through demonstration and supervision, and
- Attend meetings and other activities as required, as directed by the supervisor.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

- Description of the service provided,
- Date and time the service was provided,
- Where the service was performed,
- Total time spent providing the service, and
- Name of the worker providing the service.

**Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$10.00/hour CWCMP: If purchased from a subcontractor, report actual cost as “line charge” in encounter data.	SGF TANF

## FOSTER CARE TRANSITION SUPPORT

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
X	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report:	

### **Definition**

Time limited support service for young adults released from the custody of the Secretary at age 18 or older who are not released to a permanent connection through reintegration, adoption or custodianship and are placed in a family foster home at the time of release of custody. DCF regions may purchase this service from the young adult's licensed or approved family foster parent as a support for young adults to achieve self sufficiency. Monthly payments will be made directly to the youth who will pay the foster parent directly. This supportive service assists with transition in educational settings, transportation needs, residency needs and employment needs.

A youth's marital status does not impact eligibility.

### **Provider Minimum Qualifications**

Foster parent's home must be licensed or approved by KDHE.

### **Duties**

Assist with transition in educational settings, transportation needs, residency needs and employment needs for the period specified on the Client Service Agreement.

### **Documentation**

The DCF file and the youth shall maintain, at minimum...

- a client service agreement signed by the young adult for supportive services, with beginning and end date of supportive service;
- open and signed Self Sufficiency Plan CFS 7000;
- completed and signed Monthly Budget Plan CFS 7000A;
- written education or employment plan.

### **Limitations**

Services may begin the month the eligible adult is released from custody. Eligibility continues for a period up to 120 days; or, for young adults age 18 or older who are in their junior year of high school at the time of release from custody, the service may continue for a period up to 365 days.

Units of Services	Suggested Rate	Funding Source
Daily rate	\$10.00/day	SGF, Other

## **HOME STUDY: ADOPTION**

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
<input checked="" type="checkbox"/>	<b>Provider Agreement Required</b> for DCF to purchase	<input type="checkbox"/>	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
<input type="checkbox"/>	<b>DCF can purchase without PA</b> ; CSA required	<input type="checkbox"/>	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

An adoptive family home study is the primary document used in a Best Interest Staffing to determine if a family is the most appropriate adoptive resource for a child. The home study process includes a review of all written material, including MAPP information, and interviews with the family. The document should provide a thorough picture of the family's strengths, needs, values, attributes and living environment.

An adoptive home study is required for all families seeking to sign an Adoptive Placement Agreement for a child, and to request consent for adoption. A foster home study (if done by child placing agencies) may provide significant information, but does not encompass issues and questions to be addressed with the family as a potential adoptive home.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

#### *Degree/Licensure*

- Licensed Specialist Clinical Social Worker (LSCSW); OR
- Licensed Bachelor or Licensed Master's degree Social Worker who is directly supervised by a LSCSW (LSCSW will sign off on the Home Study report); OR
- Licensed Social Worker employed by a Licensed Children Placing Agency with experience in adoption assessments.

#### *Experience*

- Must have two years experience in family based service delivery

### **Duties**

Duties include but are not limited to:

- at least one on-site visit to the home in question;
- interviews with all family members living in the home;
- follow-up in any area requiring additional information;
- completion of a written report

The following information needs to be gathered in order to complete an adoption home study:

1. Adoption application
2. Marriage/divorce decrees
3. Health examinations
4. HIPAA notification and authorization
5. Positive discipline agreement

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

6. Floor plan
7. KBI and CANIS background checks (must be updated annually)
8. National Criminal background check (fingerprint check)
9. PS-MAPP completion certificate (for families that are not relatives)
10. Motor vehicle report
11. References (4)
12. Employment verification

**Documentation**

A written report is expected at the completion of the home study as described in the Client Service Agreement. The report will, at a minimum, contain the following sections:

- Basis for Home Study
- Motivation to Care for Specific Child
- Specific Needs of the Child
- Social History (description of all household members; relationship of current household members; how each member feels about the placement of an additional child in the family to include impact on sharing rooms, parents time; describe any special needs of household members)
- Martial Status of Caretaker (describe length and stability of relationship; if shared living-unmarried--who will have primary child care responsibility; number of marriages)
- Parenting Ability (describe parenting experience in general; describe strengths and needs in ability to parent specific child(ren); describe discipline practices)
- Support of Extended Family Members/Community
- Educational Needs of the Child
- Child Care Plans
- Physical Characteristic of the Home (describe the number of rooms, number of bedrooms, care and maintenance of the home; if child will share room with a child already in the home, are there any concerns by the parents of child having to share space)
- Employment History
- Finances and Monthly Expenses (can family (household) adequately meet their monthly expenses)
- KBI & Child Abuse Checks
- 3 References (2 should be non-relative)
- Summary and Recommendation (provide a strengths/needs summary of the foster family and their ability to parent the referred child; concerns should be addressed; are there any resources needed by the parent that would assist them in *parenting* the child)

NOTE: If preparing this home study for a potential referral to the State's Adoption Contractor, please contact the Adoption Contractor for the desired format.

**Limitations**

One study, per family, per year

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly plus mileage	\$50-\$60/hour, averaging 10 hours per study plus \$0.47/mile for transportation related to completion of the study	SGF



## HOME STUDY-GENERAL

DCF Purchased Service		CWCMP Contract Provided Service	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

A home study is a written assessment of the person's personal history, family relationships, and home environment. Typically performed by licensed child placing agencies to license a foster home, home studies could be needed for, but are not limited to, the following situations:

- ICPC home study request (unless for adoption—see Home Study-Adoption page);
- court ordered non-custody CINC cases where the court has ordered DCF to do a home study on a parent or relative; these cases are usually in informal supervision status with the court;
- domestic cases where the court orders DCF to conduct a home study on each parent to determine residential custody.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

#### *Degree/Licensure*

- Licensed Specialist Clinical Social Worker (LSCSW); OR
- Licensed Bachelor or Licensed Master's Degree Social Worker who is directly supervised by a LSCSW (LSCSW will sign off on the Home Study report); OR
- Licensed Marriage and Family Therapist; OR
- Licensed Professional Counselor; OR
- Certified Master's Degree Counselors registered with the Behavioral Sciences Regulatory Board; OR Certified Master's Degree Psychologist registered with the Behavioral Science Registry Board; OR
- Licensed Social Worker employed by a Licensed Child Placing Agency with experience in adoption assessments.

#### *Experience*

- Must have two years experience in family based service delivery

### **Duties**

Duties include but are not limited to:

- at least one on-site visit to the home in question;
- interviews with all family members living in the home;
- follow-up in any area requiring additional information;
- completion of a written report

### **Documentation**

A written report is expected at the completion of the home study as described in the Client Service Agreement. The report will, at a minimum, contain the following sections:

- Basis for Home Study
- Motivation to Care for Specific Child
- Specific Needs of the Child
- Social History (description of all household members; relationship of current household members; how each member feels about the placement of an additional child in the family to include impact on sharing rooms, parents time; describe any special needs of household members)
- Martial Status of Caretaker (describe length and stability of relationship; if shared living-unmarried--who will have primary child care responsibility; number of marriages)
- Parenting Ability (describe parenting experience in general; describe strengths and needs in ability to parent specific child(ren); describe discipline practices)
- Support of Extended Family Members/Community
- Educational Needs of the Child
- Child Care Plans
- Physical Characteristic of the Home (describe the number of rooms, number of bedrooms, care and maintenance of the home; if child will share room with a child already in the home, are there any concerns by the parents of child having to share space)
- Employment History
- Finances and Monthly Expenses (can family (household) adequately meet their monthly expenses)
- KBI & Child Abuse Checks
- 3 References (2 should be non-relative)
- Summary and Recommendation (provide a strengths/needs summary of the foster family and their ability to parent the referred child; concerns should be addressed; are there any resources needed by the parent that would assist them in *parenting* the child)

### **Limitations**

One study, per family, per year

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly plus mileage	\$50-\$60/hour, averaging 10 hours per study plus State mileage rate for transportation related to completion of the study	SGF

## IN-HOME FAMILY TREATMENT

DCF Purchased Service		CWCMP Contract Provided Service	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

Therapeutic intervention by a qualified provider to help remedy client family problems. The purpose of the intervention is to avoid out-of-home placement, or to facilitate a child's successful return to the family or alternate permanency if out-of-home placement has occurred. The Medicaid eligible child shall be present or the focus of the in-home family treatment. In-home family treatment shall not focus exclusively on the specific clinical issues presented by the Medicaid eligible family members.

*In-home family treatment services are not intended to take the place of therapeutic services provided by mental health professionals nor are they intended to meet the needs of children who require well coordinated treatment efforts due to severe emotional disturbance.*

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Enrolled Medicaid provider, or  
Licensed Master's Degree Social Workers, or  
Licensed Marriage and Family Therapist, or  
Licensed Professional Counselor, or  
Psychiatrist, or  
Ph.D. Psychologists, or  
Certified Master's Degree Counselors registered with the Behavioral Sciences Regulatory Board; or  
Certified Master's Degree Psychologist registered with the Behavioral Science Registry Board, AND
- Must have two years experience in family based service delivery,

### **Duties**

Each service provider shall perform, at minimum the following duties:

- Provide treatment and interventions which assist the client in reaching the goals of a mutually agreed upon treatment plan.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Description of the service provided,
- Date and time the service was provided,
- Where the service was provided,

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013


- Total time spent providing the service, and
- Name of the worker providing the service.

**Limitations**

Documentation in the treatment plan must support that in-home family treatment is necessary to prevent out-of-home placement or support reunification of a child under 18 years of age, and Shall be prior authorized through a Client Service Agreement or Case Plan.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$80.00/hour	Medical Card, SGF, TANF

## INDEPENDENT LIVING SERVICES

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

Independent Living life skills services prepare a youth for successful living on their own. They can include, but are not limited to, the following:

- Career Planning
- Communication
- Daily Living
- Home Life
- Housing/Money Management
- Self Care
- Social Relationships
- Work Life
- Work Study Skills

### **Provider Minimum Qualifications**

- Provider must be an individual or business with a minimum of 2 years experience in providing life skill services.
- Individuals offering to provide this service must have passing screens, paid for by the individual, for KBI, DCF Child Abuse Registry, Adult Abuse Registry, and Motor Vehicle screens. Businesses offering to provide this service must show proof that their agency has received passing reports for the screens listed above for any staff within their agency that plan to provide this service.

### **Duties**

Assist with youth learning life skills according to the case plan.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Description of the services provided;
- Date and time the service was provided;
- Where the service was performed;
- Total time spent providing the service; and
- Name of the worker providing the service.

**Limitations**

Youth receiving this service must be at least 16 years or older

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$34/hour	SGF, CHAFEE

## JOB READINESS TRAINING

DCF Purchased Service		CWCMP Contract Provided Service	
X	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA;</b> CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF063</b>	

### **Definition**

This service provides the youth an opportunity to earn money and learn employment skills through a paid training program. The youth may learn specific job skills, but the intent of the program is to teach the youth basic skills that are applicable to all work situations. The training may provide the youth with work experience with supervisor and co-workers as well as classroom instruction. The youth will learn skills that will enable him/her to get along and progress in an actual work environment.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Provider must be an incorporated agency/business,
- Trainer must have a Bachelor's Degree from a four year college in the area of human services, education , or vocational counseling or two years work supervision experience or a combination of experience and education that enables the trainer to teach work skills as documented on a resume and/or letter(s) of reference,
- Be at least 21 years of age, with a minimum of three years age span between the worker and the client, and
- Letter(s) of reference noting a demonstrated ability to teach, be a positive role model, and to work well with other team members.

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- Develop a written needs assessment and service plan,
- Teach go-to-work skills such as attendance, dress, punctuality, and safety,
- Teach productivity, how to do quality work and employee responsibility on the job,
- Teach communication skills such as negotiation during disagreements, communicating with supervisors and co-workers, conflict resolution,
- Increase positive self-concept through paid work experience, and
- Teach interviewing skills and ways to seek employment.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- A written training program with an annual plan for reviewing and updating materials in the program,

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

- A written annual report showing review/update of program including why changes, if any, were needed and their effective dates,
- Written client progress reports to be submitted within the time frames specified on the Client Service Agreement, and
- Agency supervision will complete a daily work log for each client which will include:
  - Description of the work performed,
  - Date and time client reported for/left work, and
  - Name of supervisor providing the training.

**Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$34.00/hour Rate includes wages to be paid to client by provider. CWCMP: report actual cost as “line charge” in encounter data.	SGF



## MEDIATION SERVICES

DCF Purchased Service		CWCMP Contract Provided Service	
X	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> • in-home • out-of-home services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF008</b>	

### Definition

Mediation is a process by which a neutral mediator assists parties in reaching a mutually acceptable agreement as to issues in dispute. The role of the mediator is to aid the parties in identifying issues, reducing misunderstandings, clarifying priorities, exploring areas of compromise, and finding points of agreement. An agreement reached by the parties is to be based on the decisions of the parties and not of the decisions of the mediator. (This does not include divorce proceedings.)

### Provider Minimum Qualifications

Providers of this service must, at minimum, meet the following qualifications:

- (1) A Baccalaureate Degree from a four year college in a human services field,
- (2) At least two years experience in a human services field,
- (3) Documentation such as a resume, transcript, and/or letter(s) of reference demonstrating a knowledge of:
  - Dynamics of domestic relations,
  - Other resources in the community to which parties can be referred for assistance,
  - Child development,
  - Clinical issues related to children,
  - Effects of loss on children,
  - Psychology of families, and
  - Specific knowledge and skills in the process and techniques of mediation.

### Duties

Each service provider shall perform, at minimum, the following duties;

- Prepare a written summary of any understanding reached by the parties,
- Any understanding reached by the parties as a result of mediation shall not be binding upon the parties until it is in writing, signed by all parties, and approved by DCF,
- Submit written reports to DCF as per the Client Service Agreement, which should contain the following:
  - Progress and activity related to mediating the issues between the parties,
  - Dates and type of contact,
  - Issues addressed,
  - Barriers encountered, and
  - Approaches planned.

**Documentation**

Each service provider shall maintain, at minimum, a contact log for each client, which shall include:

- Date and time service was provided,
- Total time spent providing the service,
- Name of individual providing the service, and
- Written reports will be submitted within the time frame specified in the Client Service Agreement.

**Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$50.00/hour CWCMP: report actual cost as “line charge” in encounter data.	SGF

## NON-MEDICAL TRANSPORTATION

DCF Purchased Service		CWCMP Contract Provided Service	
X	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> • in-home • out-of-home services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF051.1 foster child to visitation (IV-E funded)</b> <b>CF051.2 all other transportation (SGF funded)</b>	

### Definition

- CWCMPs:  
**CF051.1** - Transportation of the child for visitation with parents, siblings, relatives, or other caretakers in their home or other appropriate setting. Transportation to school so the child can remain in the school in which they were enrolled at the time of placement. Use of secure transports and taxi services for these purposes would fall under this service procedure code.  
**CF051.2** – Transportation of the child for other purposes besides visitation which also includes secure transports and taxi services for non-visitation and non-school-of-origin purposes.
- DCF purchases:  
Transportation of care giver or child to non-medical destinations. Transportation could be provided by an agency or individual.

### Provider Minimum Qualifications

Providers of this service must, at minimum, meet the following qualifications:

- Valid Driver's License;
- Proof of insurance;
- KBI criminal background check;
- CANIS

### Duties

Provide reliable, on-time transportation per Client Service Agreement.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

- Description of the service provided;
- Date and time the service was provided;
- Destination of service and purpose;
- Total miles driven providing the service; and
- Name of the driver.

**Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
mile	State mileage rate or “per trip” rate as established by provider. CWCMPs: If purchased from a subcontractor, include actual costs as a “line charge” in the encounter data.	SGF IV-E Maint (CF051.1 only)

## PARENT/CHILD INTERACTION

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF064</b>	

### **Definition**

Children and parents who live together see each other in a variety of natural settings throughout the day. This includes eating meals together; working on homework; attending school, church, or community events; going to medical appointments; etc. Children who are not living with their parents need to have the opportunity to still engage with their parents in as many of these normal, daily activities as possible. These interactions give the family a chance to maintain their emotional bonds and promote the importance of family. If these interactions occur with the foster family present as well, they are an opportunity for the foster family to model parenting skills for the birthparents. These interactions are also a means to assess the parents' readiness to resume care for their child.

Parents and children retain the right of reasonable contact with each other, regardless of the case plan goal, unless parental rights have been legally terminated or the court has restricted contact. For children with a case plan goal of reintegration, face-to-face parent/child interaction shall occur at least once a week, with telephone contact and unlimited mail if deemed appropriate and in the best interests of the child. For children with a case plan goal other than reintegration, the frequency of face-to-face parent/child interaction shall be a family driven decision that is reflected in the case plan for the child.

Parent/child interactions include longer periods of time spent by the child with the birth parents, such as all day, overnight, weekend visits, etc., as the child and family are successful in accomplishing the tasks and goals that are required to achieve reintegration.

### **Provider Minimum Qualifications**

Providers of this service must be employed, or be subcontracted with, one of our current CWCMP contract providers.

### **Duties**

The place where the parent/child interactions occur shall be determined based on the best interests of the child, and the activity in which the parent and child shall be engaged. Whenever possible, parent/child interactions shall occur unsupervised. At other times it may be determined necessary for these interactions to be supervised, by either Case Management Provider or the foster family.

Parent/child interactions may occur in the home of the foster family, thus reinforcing the role of the foster family to serve a mentor to the birth family by modeling appropriate parenting skills. Guidelines for these

interactions that occur in the foster family home shall be reviewed and discussed by the birth parents, child, foster family, and Provider prior to the first occurrence so all persons have a clear understanding of their roles and expectations.

### **Documentation**

Plans for required interactions between the parent and child shall be documented on form CFS 3050G-1, Parent/Child Interaction Plan. The plan shall identify the frequency of the interactions. Supervised interactions shall take place only as required by a court order or for reasonable cause documented on the Parent/Child Interaction Plan, CFS 3050G.

Parent/child interactions shall be documented in the case file as occurring. An encounter data code has been created for these interactions, and these interactions shall to be included in the monthly submission of encounter data to CFS. Foster families shall document Parent/Child Interactions on their logs as well and submit those monthly to the CWCMP Case Manager.

The Foster family's documentation of the Parent/child interactions shall include:

- the time-frame of the parent/child interaction
- observed relationship between the parent and child
- activities that parent and child participated in during the interaction
- observed positive and negative aspects of the interaction
- date and time for the next scheduled parent/child interaction

### **Limitations**

- At a minimum, one face-to-face interaction between the child and parent(s) shall occur weekly.
- If it is determined by DCF and the Case Management Provider that interaction with parents is not appropriate, the reason shall be thoroughly documented in the case logs. The court shall be notified immediately as to this decision. In addition, the Case Management Provider shall assure that the parents understand the reasons for the decision as well as their right to legally challenge it in court.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
each	not applicable	not applicable

## PARENTING ASSESSMENT

DCF Purchased Service		CWCMP Contract Provided Service	
<input checked="" type="checkbox"/>	<b>Provider Agreement Required</b> for DCF to purchase	<input type="checkbox"/>	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home   services
<input type="checkbox"/>	<b>DCF can purchase without PA</b> ; CSA required	<input type="checkbox"/>	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### Definition

Interviews and observations to determine parent(s) ability and commitment to provide safety, stability, trust and nurturing, and/or healing for children.

### Provider Minimum Qualifications

Providers of this service must, at minimum, meet the following qualifications:

- Licensed Master's Degree Social Workers; or
- Licensed Marriage and Family Therapist; or
- Licensed Professional Counselor; or
- Certified Master's Degree Counselors registered with the Behavioral Sciences Regulatory Board; or  
Certified Master's Degree Psychologist registered with the Behavioral Science Registry Board; AND
- Must have two years experience in family based service delivery

### Duties

Interview parent(s) to determine any or all of the following:

- General stability – i.e. housing, employment, schooling, finances, safety, etc.
- Social history – family relationships, significant losses in childhood, how they were parented/how they feel about that parenting, intergenerational patterns (genogram)
- History of drug/alcohol use; mental illness; domestic violence; child abuse/neglect; out of home placement; criminal behavior.
- Parenting history – names, birthdates of children, access to other parent if not in the home, identified strengths/needs of the children and themselves, needs of the children and how capable parent is of providing for those needs.
- Attitudes about parenting – expectations, discipline, understanding of nurturing and attachment, supervision, relationship with children, flexibility, boundaries, ability to recognize strengths in children, ability to provide safety, insight about previous parenting problems, understanding of results of child abuse/neglect on child's development, ability to deal with own trauma issues while parenting.
- Personal interest – hobbies, dreams and goals, interaction in the community, support system.
- Strengths/Needs as viewed by evaluator.
- Observations of parents and children together – interaction, comfort, attachment.
- Recommendations for Intervention.

**Documentation**

A written report is expected at the completion of the assessment. The report will, at a minimum, contain the sections listed under “Duties” above.

**Limitations**

There are no limitations for this service.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly plus mileage	\$50-\$60/hour, averaging 10 hours per study plus \$0.47/mile for transportation related to completion of the study	SGF



## PARENTING EDUCATION

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home   services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### Definition

Teaching of parenting skills to parents through a group model to improve and enhance abilities to parent children in a positive/acceptable manner. Services are provided in a teaching/training method and should include, but not be limited to, role play, discussion, audio/visual, written materials, home work assignments or other methods to enhance parenting skills and prevent the occurrence of child abuse/neglect. Services could be both cognitive and affective in learning style.

NOTE: For CWCMP Contract Providers, Parenting Education is reported under Family Support Services (CF011).

### Provider Minimum Qualifications

Providers of this service must, at minimum, meet the following qualifications:

- Bachelor's Degree from a four year college in the area of human services or education OR a high school diploma or equivalent with two years experience relevant to parenting education,
- Documentation showing that the teacher is certified in the curriculum they are using, and
- Letter(s) of reference noting a demonstrated ability to teach, be non-judgmental, communicate effectively, and interact effectively in a group setting.

### Duties

Each service provider shall perform, at minimum, the following duties:

Educate participants in positive and/or non-physical discipline,  
Provide participants tools to assess and meet self needs, and  
Provide community resource information.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

Completion of contact log for each client which will include:

Name of individual receiving services,  
Description of service provided,  
Date and time the service was provided, and  
Total time spent in providing the service.

Written reports outlining the client's progress and other recommendations submitted within the time frames specified in the Client Service Agreement.

**Limitations**

One course of study or up to 45 hours for individually designed parent education services.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$34.00/hour (material can be extra)	SGF

## PARTIAL-DAY SOCIAL/EDUCATIONAL SERVICES

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

To enable the children/youth with mental illness, behavioral disorders, emotional disturbance and/or chemical dependency to remain in or return to the community by providing services to the youth and supporting services to the family as per the Client Service Agreement. This may include on-site schooling provided by the youth’s school district or intervention in academic and/or behavioral concerns within a community school setting. The service is also available as a transitional or maintenance service for those who have been in a more intensive form of care such as hospitalization or residential treatment. Services are provided from four to eight hours a day, five days a week.

For private insurance funding or Medicaid funding, the service must meet the requirements for “Partial Hospitalization Activity” as set forth in the CMHC Provider Manual.

### **Provider Minimum Qualifications**

The provider must be an incorporated agency/business. Employees hired by this agency must meet the following qualifications within the following categories:

- Program Manager
  - Bachelor’s Degree from a four year college in the area of human services with two years experience in a child care setting.
- Youth Care Staff
  - At least 18 years of age with a minimum of three years age span between worker and client,
  - High school diploma or equivalent,
  - Negative TB skin test,
  - Documentation showing previous experience in working with youth in a therapeutic manner,
  - Screened through KBI and Kansas Child Abuse and Neglect Central Registry, and
  - Documentation showing 18 hours of in-service training yearly.
- Tutors
  - Bachelor’s Degree from a four year college with a major or minor in education, OR a qualified teacher, OR a student teacher supervised by one of the above.
- Consultants
  - A Licensed Specialist Clinical Social Worker, OR Registered Psychologist, OR Licensed Psychiatrist, OR Master’s Degree Counselor registered with the Behavioral Science Regulatory Board.

NOTE: This person may or may not be on staff.

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- Provide daily structured program including situational counseling, family involvement, and other planned activities,
- Submit written reports per the Client Service Agreement,
- Develop a written service plan,
- Provide support personnel for intervention in academic difficulties and/or behavioral concerns within the daily school setting,
- Provide after-school program concentrating on academic concerns, basic social skills, and improved self-esteem, and
- Conduct on-site individual/family therapy on an individual basis or make recommendations to DCF for referral of family for individual therapy as necessary and/or other resources needed by the family.

### **Documentation**

Each service provider shall maintain at minimum, the following documentation:

- A written service plan to be carried out by agency staff, consultants, and/or with assistance from other sources which includes the following:
  - Identification and assessment of the youth's needs,
  - Listing of services that will be provided to meet the youth's and the family's needs and who is providing the service and at what frequency, and
  - Plan for reviewing and updating the service plan.
- Completion of a daily contact log for each client which includes the following:
  - Description of the service provided,
  - Date and time the service was provided,
  - Where the service was provided,
  - Total time spent providing the service,
  - Name of the worker providing the service, and
  - Names of family members participating.

### **Limitations**

140 days of service

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$15.00/hour (This is the Medicaid approved rate; DCF can not pay more than this rate.)	Medical card, SGF

## PLACEMENT: AWOL

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF071</b>	

### Definition

Child is a runaway from any out-of-home placement. This code is reported when the Contractor is not paying to hold a bed in a foster care setting.

### Provider Minimum Qualifications

Not applicable

### Duties

Each service provider shall perform, at minimum, the following duties:

- Contractor must monitor the child's status at least monthly.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:


- Dates the service AWOL occurred.

### Limitations

Not applicable

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	not applicable	not applicable

## **PLACEMENT: CHILDREN’S RESIDENTIAL SERVICES—MR/DD WAIVER**

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF079</b>	

### **Definition**

Children are placed in a Children’s Residential Services home due to such placement being part of the child’s MR/DD waiver person-centered plan.

There are two benefits received by a child in this type of placement:

- For services - payments received from the MR/DD waiver are for services needed by the child; these should not be reported in encounter data as a “payment” made to the family.
- For maintenance –Maintenance costs can be covered in two ways:
  - The children’s residential services home can become payee of the child’s SSI benefit; in these instances the CWCMP is not responsible for also making a maintenance payment to the home (the SSI *is* the maintenance payment). The line charge provided with CF079 in this situation would be -0-.
  - If the supported family living home does not desire to be payee, DCF will remain payee of the SSI benefit; the CWCMP shall negotiate a maintenance payment with the home. It is this maintenance payment that is reported as a line charge with CF079 in this situation.

### **Provider Minimum Qualifications**

Each Children’s Residential Services home is required to meet KDHE licensing requirements for family foster homes and be sponsored by a KDHE licensed child placing agency. CDDOs are the point of contact for placement in one of these homes.

(No documentation of this approval is necessary for the CWCMP contract provider’s file)

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- The Contractor must monitor the child’s status at least monthly.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Description of the placement,
- Dates of placement,
- Location of placement, and
- Name of the Children’s Residential Services home.

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

**Limitations**

Not applicable

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	Report line charge on encounter data as indicated above.	SSI benefit, if applicable

## PLACEMENT: COMMUNITY INTEGRATION PROGRAM (CIP)

DCF Purchased Service		CWCMP Contract Provided Service	
X	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; ILA required	X	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF074.2</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

This placement service is for youth living in their own apartment, which includes a college dormitory. The subsidy is paid to the client, a community advisor, or directly to the vendor for rent, utilities, and food as described in the youth's case plan. This service is for placement only. See service pages on "Life Skills" for independent living related services, such as budgeting, resume writing, GED preparation, etc.

(This service code does not include Job Corp placements; use CF082 for Job Corp placements.)

### **Provider Minimum Qualifications**

Staff must meet the qualifications and responsibilities as set forth in the DCF Placement Service Standards Manual. Written job descriptions shall be developed for all staff and maintained on site where personnel functions are carried out.

#### **Administrator**

##### **Qualifications**

- The administrator shall have a Bachelor's degree and prior administrative experience.
- Shall not be a person restricted from working with youth as defined by K.S.A. 65-516.
- Shall have a working knowledge of adolescent development principles.

#### **Community Integration Specialist**

##### **Qualifications**

- The Community Integration Specialist shall have at least a bachelor's degree in one of the human service fields (social work, psychology, human development and family life, criminal justice, counseling, nursing or education) and have a working knowledge of adolescent development principles.
- Shall be at least twenty-one (21) years of age and at least three years older than the oldest youth served.



- Shall not be a person restricted from working with youth as defined by K.S.A. 65-516.

### **Duties**

#### **Administrator**

##### **Responsibilities**

- Shall be responsible for working with, supervising and training other staff (e.g., Community Integration Specialist) who are working with youth in the community integration program.

#### **Community Integration Specialist**

##### **Responsibilities**

- Service Access plan development, review, and development of collaborations with community-based service providers.
- Shall be responsible for any monitoring of youth activities as required.
- Shall inspect youth's apartment as needed to insure the safety and security of youth.
- Shall coordinate or provide alternative transportation as deemed necessary.
- Shall complete paperwork or reports to referring agency as required.
- Shall work shifts and or be on-call 24 hours a day on a rotating basis.
- Shall be responsible for the day-to-day modeling of life skills (e.g., assertiveness, communication, conflict management, problem solving, and decision making).
- Shall monitor youth's daily life skills and provide appropriate feedback.
- Shall review bank statements, check stubs, etc. to insure youth's adherence to savings requirements

### **Documentation**

#### ***Chart Documentation:***

A dated record of significant occurrences involving each youth shall be maintained. The record shall include events, which may affect the well being of the youth. The record shall be available for review. Each report shall include the date and time of occurrence, the staff member and/or youth involved, the nature of the incident and the circumstances surrounding it.

#### ***Weekly Progress Notes:***

Notes shall be completed by the Community Integration Specialist and staff providing services. These notes must be entered into the youth's chart, reflecting the delivery of services according to the program plan. This documentation must address the youth's responses to interventions and the progress of the youth on individualized goals and objectives. The note should include any significant events that occurred during the week and should also summarize contacts with family members and other involved agencies. If an unmet need is identified, the note must reflect the actions to be taken to revise the plan for the youth to meet that need.

#### ***Health Records:***

Records of medications shall be kept in each youth's case medical record and include: the name of the prescribing physician, the name of the medication, the dosage prescribed, the medication schedule, the purpose of the medication, noted side effects, the date of the prescription, and the date prescribed by a physician. A record of medication given, amount, date and time, and person dispensing shall be recorded. All doctor and dental visits, major illnesses, and accidents shall be recorded. Mental health

appointments shall also be specifically documented in a youth's medical record. This provides for a complete Health record for the youth and their family, which documents the frequency of the youth's mental health treatment.

***Monthly Progress Reports:***

Within the first 15 days of the youth's admission to the CIP program the Community Integration Specialist shall provide written placement recommendations to the youth's custodial case managers as well as an update on the youth's progress. This report shall be placed in the youth's file. Thirty-day progress reports shall document progress on specific short-term goals, describe significant revisions in goals and strategies, and specify any new program goals and strategies during the period covered. The 30-day progress reports shall summarize progress and note changes regarding long-term placement and program goals and shall also be placed in the youth's file.

***Permanency Planning:***

Includes the evaluation and design of an approach for the youth and family that focuses on opportunities for the youth to have ongoing active and meaningful connections with family, kin, relatives, and the community. The goal for achieving permanency shall be coordinated with the youth's custodial case manager. The permanency plan shall include strategies and tasks to accomplish the youth's goals. Behaviors which place the youth at risk for disruption, activities to prepare the youth's family or kinship network for reunification, identification of other less restrictive living environments and preparing the youth for transition to these settings shall be addressed.

**Record Retention:** Case records, including medical records, shall be maintained 5 years from the date of the youth's discharge or until completion of an on-going audit and production of a final audit report, whichever is longer.

**Limitations**

All youth in community integration placements must:

- Be at least 16 years of age
- Be working full or part-time
- Be working towards a diploma or equivalent (if not already obtained)
- Have demonstrated the ability to perform life skills
- Consult the Placement Service Standards Manual for guidance.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$95.00/day (non-negotiable) CWCMP: report actual cost as "line charge" in encounter data.	SGF

## PLACEMENT: CORRECTIONAL FACILITY

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF072</b>	

### **Definition**

Child is placed in any correctional facility, including detention center. This code is reported when the Contractor is not paying to hold a bed in a foster care setting.

### **Provider Minimum Qualifications**

Not applicable

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- The Contractor must monitor the child's status at least monthly.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Description of the placement,
- Dates of placement,
- Placement location, and
- Name of the facility.

### **Limitations**

Not applicable

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	not applicable	not applicable

## PLACEMENT: EMERGENCY FAMILY FOSTER HOME

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ● in-home   ● out-of-home   services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF027</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

An emergency foster home is a family home in which 24-hour care is provided to children who are in need of out of home placement to meet their safety and well-being needs. These homes shall meet KDHE licensure requirements, and be sponsored by a licensed child placing agency. Children under 16 years of age shall be placed in a licensed home. Children over 16 years of age may be placed in a home approved as meeting licensing standards. The foster family is an integral part of the team working with the child and birth family in order to achieve timely permanency for the child. The population served is children and youth ages birth thru 21, who:

- Need an appropriate family setting to reside while a long term placement is located; or,
- Are in Policy Protective Custody (PPC).

### **Provider Minimum Qualifications**

- Meet KDHE licensure requirements and sponsored by a licensed Child Placing Agency,.
- Each emergency family foster parent shall complete the PS-MAPP curriculum as a pre-service requirement
- Each emergency family foster parent must be at least 18 years of age at the time of application to KDHE for licensure, and have been a member of the household for at least one year prior to application.
- Each emergency family foster parent shall provide evidence of child care experience and knowledge of child care methods which will enable any child to develop his or her potential.
- The emergency family foster home shall meet the legal requirements of the community as to zoning, fire protection, water supply and sewage disposal.

### **Duties**

Services provided in an emergency family foster home include: supervision, food, shelter, age appropriate daily living skills instruction, transportation, recreation, supporting parent/child interactions (when these have not been prohibited by the court).

The daily schedule shall address the needs of the child and the use of time to enhance the child's physical, mental, emotional, and social development. Indoor and outdoor recreation shall be provided, and play equipment, books, and other materials shall be safe, clean, in good repair, and suitable to the developmental needs and interests of the child. The child shall attend school regularly and also have time for school and community activities. The child shall be provided opportunities to practice age appropriate daily living skills.

### **Documentation**

#### ***Child's File:***

The emergency family foster home shall maintain a file for each child in placement. The file shall contain the following information:

- Child's name and date of birth
- Name and address of the child's referring agency case manager/social worker/law enforcement officer
- Client Service Agreement (for parental placements paid by DCF)
- Medical and surgical consents
- Medical and dental records (except for PPC placements)
- Record of child's prescription and non-prescription medications and when administered (except for PPC placements)
- Authorization for release of confidential information
- Log of critical incident reports

### **Limitations**

Limited to 30 consecutive days.

The emergency family foster home shall be licensed/approved for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the foster parents' own children under 16 years of age. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$36.66/day CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint, SGF, TANF

## PLACEMENT: EMERGENCY SHELTERS (ES)

<b><u>DCF Purchased Service</u></b>		<b><u>CWCMP Contract Provided Service</u></b>	
X	<b>Provider Agreement Required for DCF to purchase</b>	X	<b>Responsibility of CWCMP Contracts</b> • in-home • out-of-home services
	<b>DCF can purchase without PA; CSA required</b>	X	<b>Provider Agreement Required for residential rate sheet<sup>1</sup></b>
		<b>for encounter data report: CF003</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

Twenty-four hour care which has been licensed by KDHE as a Residential Center which covers the programming the facility will provide to the populations of children/youth whom the facility will serve. Population served is children and youth, ages birth thru 22, who:

- need a safe place to stay until a more appropriate placement can be found for the child/youth;
- are in Police Protective Custody.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Facility shall be licensed by KDHE as a Residential Center;
- The administrator shall have a Bachelor's degree, prior administrative experience and a working knowledge of child development principles.
- Child care staff shall be at least 21 years of age and have at least a high school diploma or equivalent and shall practice accepted methods of child care. Facility staff must be trained to effectively meet the special needs of youth who require this level of care.
- Child care workers must possess a high school diploma or GED and must have completed 24 hours of in-service training provided by the facility before they can function independently.

### **Duties**

The provider shall write a policy and procedure manual for the operation of the Emergency Shelter facility that will be reviewed and approved by DCF Children and Family Services and the Juvenile Justice Authority. It will provide a program for youth in the facility that covers the following program components:

**Daily Living Services** - Daily living services shall be provided and include the following:

- Room, board, child care, personal spending money, and school fees.
- Transportation to appointments within a 60-mile radius; including to and from school, medical care, recreation, etc.

- Academic activities - assistance with school work, vocational training, and/or G.E.D. training.

***Situational Training-*** to include but not limited to:

- Personal Hygiene - Body cleanliness, use of deodorants and cosmetics, appropriate clothing, choosing clothing to fit individual and occasion, and keeping clothes neat and clean.
- Health - Identifying and understanding residents' health needs; securing and utilizing necessary medical treatment including preventive and health maintenance services; gaining information and education in health maintenance (including preventive measures, nutrition, menstruation, rest, cleanliness, family planning, drugs, sexually transmitted diseases, exercise, and motivation for meeting own health needs), maintaining contact with providers of health services (physician, nurse, clinic) and using outside resources for assistance (clinics, pharmacies, hospitals).
- Consumer education for independent living- Budgeting, comparative buying, installment buying, avoiding risks, identifying illegal or excessive interest rates, use of credit, avoiding or dealing with debts, using checking and savings accounts, and paying taxes.

***Communication skills:***

- The youth's articulating thoughts and feelings through appropriate use of such skills as speech, writing, and use of the telephone.

***Home Management:***

- Making the bed and changing linens, using the vacuum cleaner, dusting, organizing belongings, disposing of trash, cleaning all areas of the home, operating appliances, cooking complete meals, making simple repairs, who to call when a major repair is needed, being aware of the need for upkeep, handling emergencies, knowing first aid.

***Situational Guidance:***

- Identifying and accepting strengths, developing patterns of acceptance and coping with authority figures, getting along with others, sharing responsibility, being considerate of others, developing friendships, knowing when to go home when visiting, recognizing or modifying attitudes toward self or others, responsible work attitudes, tolerance of verbal criticism, reactions to praise, punctuality, and attendance.

***Recreation:***

- Participating in leisure time activities, learning how to spend leisure time, developing outside activities, managing time, finding recreation with little or no expense involved, finding community projects to take part in, participating in social groups, participating in sports and games, arts and crafts, and appreciating fine arts.

**Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Placement Agreement,
- Client Service Agreement, if applicable,
- Daily logs,
- Case records, including Case Plan,

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

- Incident reports, as appropriate, and
- Records, including Health Record, Personnel Record, and In-Service Training Record.

**Limitations**

Youth may stay in emergency shelters for no more than 30 days. Extensions may ONLY be requested by the referring agency. Extensions to the 30 day emergency shelter stays will only be considered in the following circumstances:

- If a youth is placed in an Emergency Shelter in the same school district from which they were previously attending and no alternative placement is available in the district, and the youth will be finishing the school term within 60 days of admission to the Emergency Shelter and movement of the youth would result in the loss of school credit.
- The youth is awaiting an identified placement, which will be available within 45 days of admission to the Emergency Shelter.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$115.00 (non-negotiable) CWCMP: report actual cost as “line charge” in encounter data.	Title IV-E Maint. TANF



## PLACEMENT: FAMILY FOSTER HOME

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF035</b> - regular approved/licensed fh <b>CF035.1</b> - relative approved/licensed fh <b>CF035.2</b> - kinship approved/licensed fh	

### **Definition**

*For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at*

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A foster home is a family home in which 24-hour care is provided to children in need of out of home placement to meet their safety and well-being needs. These homes shall meet KDHE licensure requirements, and be sponsored by a licensed child placing agency. Children under 16 years of age shall be placed in a licensed home. Children over 16 years of age may be placed in a home approved as meeting licensure standards. The foster family is an integral part of the team working with the child and birth family in order to achieve timely permanency for the child.

NOTE: If home is not fully licensed by KDHE but license is pending use CF070 for “Kin/Non-related Kin” or CF077 “Relative”.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meeting the following qualifications:

- Meet KDHE full licensure requirements and be sponsored by a licensed Child Placing Agency.
- Each family foster parent shall complete the PS-MAPP curriculum as a pre-service requirement
- Each family foster parent must be at least 18 years of age at the time of application to KDHE for licensure, and have been a member of the household for at least one year prior to application.
- Each family foster parent shall provide evidence of child care experience and knowledge of child care methods which will enable any child to develop his or her potential.
- The family foster home shall be licensed for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the foster parents’ own children under 16 years of age. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children.
- The family foster home shall meet the legal requirements of the community as to zoning, fire protection, water supply and sewage disposal.

### **Duties**

Services provided in a family foster home include: supervision, food, shelter, age appropriate daily living skills instruction, transportation, recreation, supporting parent/child interactions (when these have not been prohibited by the court), participation in development, and review of case plan tasks and objectives.

The daily schedule shall address the needs of the child and the use of time to enhance the child's physical, mental, emotional, and social development. Indoor and outdoor recreation shall be provided. All play equipment, books, and other materials shall be safe, clean, in good repair, and suitable to the developmental needs and interests of the child. The child shall attend school regularly and also have time for school and community activities. The child shall be provided opportunities to practice age appropriate daily living skills.

### **Documentation**

#### ***Child's File:***

The family foster home shall maintain a file for each child in placement. The file shall contain the following information:

- Child's name and date of birth
- Name and address of the child's referring agency case manager/social worker
- Placement Agreement or Client Service Agreement (for child placed by DCF staff)
- Medical and surgical consents
- Medical and dental records
- Record of child's prescription and non-prescription medications and when administered
- Authorization for release of confidential information
- Log of critical incident reports

#### ***30-Day Progress Reports:***

Thirty-day progress reports shall document child's adjustment in the home, school performance (if school age), medical, dental, vision, and mental health appointments, critical incidents reported, interactions with parents, and any other significant events or issues related to the child and the placement.

### **Limitations**

The family foster home shall be licensed for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the foster parents' own children under 16 years of age. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$22.16/day CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint. TANF

## PLACEMENT: JOB CORPS

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF082</b>	

### **Definition**

Child is placed in a federal Job Corp facility. This code is reported when the Contractor is not paying to hold a bed in a foster care setting.

### **Provider Minimum Qualifications**

Not applicable

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- The Contractor must monitor the child's status on a monthly basis.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Description of the placement,
- Dates of placement,
- Placement location, and
- Name of the facility.

### **Limitations**

Not applicable

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	not applicable	not applicable

### **PLACEMENT: KINSHIP/NON-RELATED KIN CARE**

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF070</b>	

#### **Definition**

*For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at*

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A kinship foster home is a family home in which 24-hour care is provided to children who are in need of out of home placement to meet their safety and well-being needs. Informal Care/Kinship Care should be the first choice for placement when the child's family cannot provide adequate care. The foster family is an integral part of the team working with the child and birth family in order to achieve timely permanency for the child.

Case Management Providers shall negotiate a daily payment with the non-related kin providers to cover the cost of the child's room and board. They shall also provide the same level of supports and services which are provided to other foster families to ensure the child's needs are met and the placement remains stable.

NOTE: Use this code (CF070) to report placement with non-related, non-KDHE licensed/approved kin; use CF077 codes to report placement with a non-guardian, non-KDHE licensed/approved relative; use the appropriate CF035 code once the kin or relative is KDHE licensed/approved.

#### **Provider Minimum Qualifications**

Providers of this service must, at a minimum meet the following qualifications:

- Since kin are not related to the child, they shall be required to meet KDHE child care licensing laws and regulations in order to provide out of home services.
- To expedite placement of children with non-related kin, the requirement for the completion of PS-MAPP (the group process or Deciding Together) and the other training required prior to a child being placed in the home is waived. The non-related kin shall be required to complete the PS-MAPP curriculum and other pre-service training prior to licensure.
- Prior to the child's placement, the Provider shall request from the local DCF Service Center a Child Abuse/Neglect Central Registry check on all members of the non-related kin family who are age 10 and over. The Provider shall also require the members of the family who are age 10 and over sign a statement, Appendix 5F-Declaration of No Prohibitive Offenses for KDHE Licensure, indicating a check of the KBI criminal history database will not reveal any conviction for offenses, unless they

have been expunged, which would prohibit KDHE licensure. KDHE shall complete the KBI criminal records check prior to issuing the temporary permit.

- Immediately following placement, the Provider shall complete the family assessment and licensing packet. Child Welfare Case Management contracts stipulate that homes shall be fully licensed within 90 days of the issuance of the temporary license. The packet shall be sent to KDHE no later than 2 weeks after the child's placement. KDHE reviews the packet and, if all requirements are met, issues a temporary permit by 30 days after the child's placement. The temporary permit remains in effect for 90 days from the date of issuance. This temporary license may be extended for one additional period not to exceed 90 days, to allow the kin time to complete PS-MAPP/PS-Deciding Together. No further extensions shall be granted. Non-related kin shall comply with all licensing requirements of KDHE prior to a full foster home license being issued.

### **Duties**

Services provided in Kinship/Non-related Kin care include: supervision, food, shelter, age appropriate daily living skills instruction, transportation, recreation, supporting parent/child interactions (when these have not been prohibited by the court), participation in development and review of case plan tasks and objectives.

The daily schedule shall address the needs of the child and the use of time to enhance the child's physical, mental, emotional, and social development. Indoor and outdoor recreation shall be provided, and play equipment, books, and other materials shall be safe, clean, in good repair, and suitable to the developmental needs and interests of the child. The child shall attend school regularly and also have time for school and community activities. The child shall be provided opportunities to practice age appropriate daily living skills.

### **Documentation**

#### ***Child's File:***

The Kinship/Non-related Kin care parent shall maintain a file for each child in placement. The file shall contain the following information:

- Child's name and date of birth
- Name and address of the child's referring agency case manager/social worker
- Placement agreement or Client Service Agreement (for child placed by DCF staff)
- Medical and surgical consents
- Medical and dental records
- Record of child's prescription and non-prescription medications and when administered
- Authorization for release of confidential information
- Log of critical incident reports

#### ***30-Day Progress Reports:***

Thirty-day progress reports shall document child's adjustment in the home, school performance (if school age), medical, dental, vision, and mental health appointments, critical incidents reported, interactions with parents, and any other significant events or issues related to the child and the placement.

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

**Limitations**

For children/youth under age 16 - While waiting for KDHE licensure, can report this procedure code for up to 90 days, unless exception granted by the DCF regional Program Administrator or designee (documented in case file). For youth age 16+ - Contractor can approve this home and reporting this procedure code is unlimited.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	varies CWCMP: report actual cost as “line charge” in encounter data.	SGF

## PLACEMENT: MATERNITY FOSTER HOME

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA;</b> CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF040</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A maternity foster home is a maternity home in which 24-hour care is provided to a pregnant or post-partum youth and her child who is not a TANF recipient, who are in need of out of home placement to meet their safety and well-being needs. These homes must comply with KDHE licensure requirements, and be sponsored by a licensed child placing agency.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meeting the following qualifications:

- Meet KDHE licensure requirements and be sponsored by a licensed Child Placing Agency.
- Each maternity foster parent shall complete the PS-MAPP curriculum as a pre-service requirement
- Each maternity foster parent must be at least 18 years of age at the time of application to KDHE for licensure, and have been a member of the household for at least one year prior to application.
- Each maternity foster parent shall provide evidence of child care experience and knowledge of child care methods which will enable any child to develop his or her potential.
- The maternity foster home shall be licensed for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the foster parents' own children under 16 years of age. The youth and her infant are both included as foster children. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children.
- The maternity foster home shall meet the legal requirements of the community as to zoning, fire protection, water supply and sewage disposal.

### **Duties**

Services provided in a maternity foster home include: supervision, food, shelter, age appropriate daily living skills instruction, transportation, recreation, supporting parent/child interactions (when these have not been prohibited by the court), participation in development, and review of case plan tasks and objectives.

The daily schedule shall address the needs of the child and the use of time to enhance the child's physical, mental, emotional, and social development. Indoor and outdoor recreation shall be provided. All play equipment, books, and other materials shall be safe, clean, in good repair, and suitable to the developmental needs and interests of the child. The child shall attend school regularly and also have time for school and community activities. The child shall be provided opportunities to practice age appropriate daily living skills.

### **Documentation**

#### ***Child's File:***

The maternity foster home shall maintain a file for each child in placement. The file shall contain the following information:

- Child's name and date of birth
- Name and address of the child's referring agency case manager/social worker
- Placement Agreement or Client Service Agreement (for child placed by DCF staff)
- Medical and surgical consents
- Medical and dental records
- Record of child's prescription and non-prescription medications and when administered
- Authorization for release of confidential information
- Log of critical incident reports

#### ***30-Day Progress Reports:***

Thirty-day progress reports shall document child's adjustment in the home, school performance (if school age), medical, dental, vision, and mental health appointments, critical incidents reported, interactions with parents, and any other significant events or issues related to the child and the placement.

### **Limitations**

The maternity foster home shall be licensed for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the foster parents' own children under 16 years of age. The youth and her infant are both included as foster children. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$33.06/day CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint. TANF



## PLACEMENT: MEDICAID PAID

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF080.1    PRTF placement</b> <b>CF080.2    all other Medicaid paid placements</b>	

### Definition

Any Medicaid-paid placement which includes, but is not limited to:

- Hospitalization of a child in a state mental health hospital following a pre-admission screening completed by the Mental Health Consortium (use CF080.2)
- PRTF (use CF080.1)
- Observation/Stabilization placements (use CF080.2)
- In-patient Psychiatric treatment (use CF080.2)
- Inpatient Drug & Alcohol treatment (use CF080.2)
- Inpatient Physical medical treatment (use CF080.2)

### Provider Minimum Qualifications

Any Medicaid approved provider. State mental health hospitals for children are defined and enabled by state statute. State hospitals meet, at minimum, J.C.A.H.O. accreditation.

### Duties

Each service provider shall perform, at minimum, the following duties:

- As specified in J.C.A.H.O. standards for inpatient hospital admissions and care.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:

- As specified in J.C.A.H.O. documentation standards.

### Limitations

Medical necessity

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	Medicaid rate	Medical Card

## PLACEMENT: PRE-ADOPTIVE PLACEMENT

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF076</b>	

### **Definition**

Used to report the child's placement in an adoptive home for the time period between the implementation of the subsidy agreement and the adoption finalization. There is no rate for this procedure. Placements in a pre-adoptive home that is licensed/approved by KDHE should be reported as a Family Foster Home (CF035).

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- (1) Pre-adoptive family must have signed an adoptive placement agreement with DCF.

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- The Contractor must monitor the child's status at least monthly.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

- Description of the service provided,
- Date the service was provided,
- Where the service was performed, and
- Name of the vendor providing the service.
- Documentation detailing the process and outcome of the home assessment and registry check.

### **Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	not applicable	not applicable

### **PLACEMENT: RELATIVE FOSTER HOME**

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF077 – relative (non-IV-E)</b> <b>CF077.1 – relative KDHE approval pending</b> (IV-E Admin)	

#### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A relative foster home is a family home in which 24-hour care is provided to children who are in need of out of home placement to meet their safety and well-being needs. The provider must be a person related to the child. The relative foster family is an integral part of the team working with the child and birth family in order to achieve timely permanency for the child.

If relative is not interested in being approved or licensed through KDHE, report this service under CF077.

If relative is interested in being approved or licensed through KDHE (documented in case log that an application to KDHE has been submitted and is pending), report this service under CF077.1

If relative is licensed or approved by KDHE, report this service under Family Foster Home CF035.

#### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Be a person related to the child
- A KBI and DCF Child Abuse/Neglect Central Registry Check has been completed on all members of the family age 10 and over, and the child's referring agency has completed an assessment of the home to determine the child's safety and well being needs will be met

#### **Duties**

Services provided in a relative foster home include: supervision, food, shelter, age appropriate daily living skills instruction, transportation, recreation, supporting parent/child interactions (when these have not been prohibited by the court), participation in development and review of case plan tasks and objectives.

The daily schedule shall address the needs of the child and the use of time to enhance the child's physical, mental, emotional, and social development. Indoor and outdoor recreation shall be provided, and play equipment, books, and other materials shall be safe, clean, in good repair, and suitable to the developmental

needs and interests of the child. The child shall attend school regularly and also have time for school and community activities. The child shall be provided opportunities to practice age appropriate daily living skills.

### **Documentation**

#### ***Child's File:***

The relative family foster home shall maintain a file for each child in placement. The file shall contain the following information:

- Child's name and date of birth
- Name and address of the child's referring agency case manager/social worker
- Placement agreement or Client Service Agreement (for child placed by DCF staff)
- Medical and surgical consents
- Medical and dental records
- Record of child's prescription and non-prescription medications and when administered
- Authorization for release of confidential information
- Log of critical incident reports

#### ***30-Day Progress Reports:***

Thirty-day progress reports shall document child's adjustment in the home, school performance (if school age), medical, dental, vision, and mental health appointments, critical incidents reported, interactions with parents, and any other significant events or issues related to the child and the placement.

### **Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	<ul style="list-style-type: none"><li>•Relative may apply for TAF or request to become payee of child's social security benefits, if applicable; OR daily rate may be negotiated between provider and family.</li><li>•Provider actual cost reported as "line charge" in encounter data.</li></ul>	varies

## **PLACEMENT: RESIDENTIAL MATERNITY CARE (RMC)**

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required	X	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF053 - mother</b> <b>CF053.1 - mother and child</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A Residential Maternity Care facility provides 24-hour care in a group boarding home or residential facility whose primary purpose is devoted to the maintenance and counseling of pregnant youth who need services related their pregnancy, and planning and care for the unborn child through labor, delivery and postnatal care.

Population served is pregnant or post-partum mother thru age 22 who:

- Display a need for more structure and supervision than provided in a family foster home due to behaviors which might include difficulty with authority figures, minor offenses, and difficulty in school; and
- Child is not a recipient of TANF.
- RMC facilities may also serve those children and youth in Police Protective Custody.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meeting the following qualifications:

- Be licensed by KDHE in the appropriate licensure category to cover the programming the facility will provide to the populations of children/youth whom the facility will serve. RMC's providing care for pregnant youth must meet the requirements of K.A.R. 28-4-279. RMC's providing care for post-partum youth and infants must meet the requirements of K.A.R. 28-4-280.
- The facility must be staffed appropriately to meet the needs of all the residents in their care. The staff ratio is 1:7 during waking hours and 1:10 during sleeping hours. If licensened as a residential center there will be 24-hour awake staff to insure child safety.
- The facility must be staffed appropriately to meet all of the KDHE staffing requirments and the facilities staffing must be adequate to meet the needs of all the residents in their care.

### **Duties**

The range of services to be delivered by the RMC facility to meet the variety of individual needs of the residents shall be explicitly delineated. The General Program description approved by DCF Children and

Family Services or JJA for each facility shall include but not be limited to the goals of the program, resident behavioral treatment system, job descriptions (responsibilities, functions, and qualifications), policies and procedures, daily living activities, health services including pre and post natal care, parenting education, recreation activities, and visitation policies.

The daily schedule shall address the needs of the residents and the use of time to enhance the resident's physical, mental, emotional, and social development. The facility shall provide supervised indoor and outdoor recreation so that every resident may participate. Age appropriate equipment to promote physical development and physical fitness shall be available. Age appropriate socialization shall be provided utilizing community fosters to assist the youth in transitioning back into their community when appropriate.

### **Documentation**

- Youth Assessments must be completed within two weeks of admittance to the program. This shall include reasons for referral to the program, evaluation of assessment in areas of (physical health, family realtions, academic/vocational training, community life, interpersoanl intreatctions, and daily living),safety risks to the youth and or community, the youth's accountability for illegal behavior and social skills the youth needs to learn in order to become law abiding (if needed).
- Program plan's must be completed for youth in placement over thirty days. The program plan shall be reviewed and documented in a progress report at least quarterly by the facility. Information obtained from the parent, guardian, or the case manager, and the youth shall be considered and indicated in the report.
- Chart Documentation: a dated record of daily observations and significant occurrences involving each youth shall be maintained. The record shall include events, which may affect the well-being of the youth. The record shall be available for review. Each report shall include the date and time of occurrence, the staff member and/or youth involved, the nature of the incident and the circumstances surrounding it.
- Health Records: Records of medications shall be kept in each youth's case medical record and include: the name of the prescribing physician, the name of the medication, the dosage prescribed, the medication schedule, the purpose of the medication, noted side effects, the date of the prescription, and the date prescribed by a physician. A record of medication given, amount, date and time, and person dispensing shall be recorded. All doctor and dental visits, major illnesses, and accidents shall be recorded. Mental health appointments shall also be specifically documented in a youth's medical record. This provides for a complete Health record for the youth and their family, which documents the frequency of the youth's mental health treatment.

### **Limitations**

The service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$60.57/day - mother only (non-negotiable) \$72.76/day - mother & child (non-negotiable) CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint. TANF

## PLACEMENT: SATELLITE FOSTER HOME

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF055</b> - regular <b>CF055.1</b> - relative approved/licensed <b>CF055.2</b> - kinship approved/licensed	

### **Definition**

*For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at*

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

Satellite Foster Homes are those which have been developed by a Licensed Child Placing Agency with whom the Contractor sub-contracts for child placement services. A family foster home is a family home in which 24-hour care is provided to children who are in need of out of home placement to meet their safety and well-being needs. These homes shall meet KDHE licensure requirements, and be sponsored by a licensed child placing agency. Children under 16 years of age shall be placed in a licensed home. Children over 16 years of age may be placed in a home approved as meeting licensing standards. The foster family is an integral part of the team working with the child and birth family in order to achieve timely permanency for the child.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meeting the following qualifications:

- Twenty-four hour care in a family home meeting KDHE licensure requirements and sponsored by a licensed Child Placing Agency.
- Each satellite family foster home is sponsored by a licensed child placing agency with whom the child's referring agency subcontracts for child placement services.
- Each satellite family foster parent shall complete the PS-MAPP curriculum as a pre-service requirement
- Each satellite family foster parent must be at least 18 years of age at the time of application to KDHE for licensure, and have been a member of the household for at least one year prior to application.
- Each satellite family foster parent shall provide evidence of child care experience and knowledge of child care methods which will enable any child to develop his or her potential.
- The satellite family foster home shall meet the legal requirements of the community as to zoning, fire protection, water supply and sewage disposal.

### **Duties**

Services provided in a satellite family foster home include: supervision, food, shelter, age appropriate daily living skills instruction, transportation, recreation, supporting parent/child interactions (when these have not been prohibited by the court), participation in development, and review of case plan tasks and objectives.

The daily schedule shall address the needs of the child and the use of time to enhance the child's physical, mental, emotional, and social development. Indoor and outdoor recreation shall be provided. All play equipment, books, and other materials shall be safe, clean, in good repair, and suitable to the developmental needs and interests of the child. The child shall attend school regularly and also have time for school and community activities. The child shall be provided opportunities to practice age appropriate daily living skills.

### **Documentation**

#### ***Child's File:***

The satellite family foster home shall maintain a file for each child in placement. The file shall contain the following information:

- Child's name and date of birth
- Name and address of the child's referring agency case manager/social worker
- Placement Agreement or Client Service Agreement (for child placed by DCF staff)
- Medical and surgical consents
- Medical and dental records
- Record of child's prescription and non-prescription medications and when administered
- Authorization for release of confidential information
- Log of critical incident reports

#### ***30-Day Progress Reports:***

Thirty-day progress reports shall document child's adjustment in the home, school performance (if school age), medical, dental, vision, and mental health appointments, critical incidents reported, interactions with parents, and any other significant events or issues related to the child and the placement.

### **Limitations**

The satellite family foster home shall be licensed for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the foster parents' own children under 16 years of age. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$33.82/day CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint. TANF



## PLACEMENT: SECURE CARE

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required	X	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF086    female facility</b> <b>CF086.1   male facility</b>	

### **Description**

*For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at*

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

Secure Care is a fully secure residential facility providing a program that offers stability and a consistent structure that will allow for an intensive individualized assessment to occur. The emphasis of the program is to be a family centered approach, which is designed to improve the youth's decision making, coping skills, and social skills while community and family supports are developed so the child may be successful upon reintegration.

Population served are youth ages 12 thru 17 who have been adjudicated by the court as a Child in Need of Care per K.S.A. 38-2202(d)(10): "is willfully and voluntarily absent at least a second time from a court ordered or designated placement, or a placement pursuant to court order, if the absence is without the consent of the person with whom the child is placed or, if the child is placed in a facility, without the consent of the person in charge of such facility or such person's designee". The court has authorized the placement of the youth in a secure facility for a period of up to 60 days. The court has authority to grant two extensions, each of no more than 60 days.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Be a KHDE licensed secure care facility.
- Case Coordinator - shall have at least a bachelor's degree in one of the human service fields (social work, psychology, human development and family life, counseling), nursing, or education.
- Administrator - shall have at least a master's degree in social work or a related field, or shall have a bachelor's degree in social work, human development and family life, psychology or education and a minimum of three years of supervisory experience within a child care agency.
- Facility child care staff - shall be at least 21 years of age with a minimum of three years age difference between the child care worker and oldest residents who can be admitted to the facility.

Child care staff shall have at least a high school diploma or its equivalent and shall also have a minimum of:

- three semester hours of college level study in adolescent development, psychology or a related subject;
  - forty five clock hours in documented training in child care or child development
  - one year of experience as a child care worker or house parent in a facility serving youth of the same age.
- The facility must be staffed appropriately to meet the needs of all the residents in their care. The staff ratio is 1:7 during waking hours and 1:11 during sleeping hours. To insure child safety, the Secure Care facility will have awake staff 24 hours a day.

### **Duties**

The range of services to be delivered by the Secure Care facility to meet the variety of individual needs of the residents shall be explicitly delineated. The General Program description approved by DCF Children and Family Services for each facility shall include but not be limited to the goals of the program, resident behavioral treatment system, job descriptions (responsibilities, functions, and qualifications), policies and procedures, daily living activities, health services, recreation activities, and visitation policies.

The daily schedule shall address the needs of the residents and the use of time to enhance the resident's physical, mental, emotional, and social development. The facility shall provide supervised indoor and outdoor recreation so that every resident may participate. Age appropriate equipment to promote physical development and physical fitness shall be available. Age appropriate socialization shall be provided utilizing community resources to assist the youth in transitioning back into their community when appropriate.

### **Documentation**

#### ***Chart Documentation:***

A dated record of daily observations and significant occurrences involving each youth shall be maintained. The record shall include events, which may affect the well-being of the youth. The record shall be available for review. Each report shall include the date and time of occurrence, the staff member and/or youth involved, the nature of the incident and the circumstances surrounding it.

#### ***Weekly Progress Notes:***

Notes shall be completed by the case coordinator and staff providing services. These notes must be entered into the youth's chart, reflecting the delivery of services according to the program plan. This documentation must address the youth's responses to interventions and the progress of the youth on individualized goals and objectives. The note should include any significant events that occurred during the week and should also summarize contacts with family members and other involved agencies. If an unmet need is identified, the note must reflect the actions to be taken to revise the plan for the youth to meet that need.

#### ***Health Records:***

Records of medications shall be kept in each youth's case medical record and include: the name of the prescribing physician, the name of the medication, the dosage prescribed, the medication schedule, the purpose of the medication, noted side effects, the date of the prescription, and the date prescribed.

by a physician. A record of medication given, amount, date and time, and person dispensing shall be recorded. All doctor and dental visits, major illnesses, and accidents shall be recorded.

***30-Day Progress Reports:***

Thirty-day progress reports shall document progress on specific short-term goals, describe significant revisions in goals and strategies, and specify any new program goals and strategies during the period covered. The 30-day progress reports shall summarize progress and note changes regarding long-term placement and program goals.

***Permanency Planning:***

Includes the evaluation and design of an approach for the youth and family that focuses on opportunities for the youth to have ongoing active and meaningful connections with family, kin, relatives, and the community. The goal for achieving permanency shall be coordinated with the youth's custodial case manager and be included in the program plan to be reviewed every 30 days. The permanency plan shall include strategies and tasks to accomplish the youth's goals. Behaviors which place the youth at risk for disruption, activities to prepare the youth's family or kinship network for reunification, identification of other less restrictive living environments and preparing the youth for transition to these settings shall be addressed.

Record Retention: Case records, including medical records, will be maintained after discharge according to DCF policies and procedures.

**Limitations**

The court has authorized the placement of the youth in a secure facility for a period of up to 60 days. The court has authority to grant two extensions, each of no more than 60 days.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$168.00/day – female (non-negotiable) \$225.00/day – male (non-negotiable) CWCMP: report actual cost as “line charge” in encounter data.	Title IV-E Maint. TANF

## PLACEMENT: SPECIALIZED FAMILY FOSTER HOME

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home   ● out-of-home   services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF036</b> - regular <b>CF036.1</b> - relative approved/licensed <b>CF036.2</b> - kinship approved/licensed	

### **Definition**

*For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at*

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A specialized foster home is a family home in which 24-hour care is provided to children who are in need of out of home placement to meet their safety and well-being needs. These homes must comply with KDHE licensure requirements, and be sponsored by a licensed child placing agency. The foster family is an integral part of the team working with the child and birth family in order to achieve timely permanency for the child.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Meet KDHE licensure requirements and be sponsored by a licensed Child Placing Agency.
- The sponsoring agency shall have a provider agreement with DCF and/or JJA for this type of service.
- Specialized family foster parent(s) are required to complete the PS-MAPP curriculum as a pre-service requirement and must also receive additional training to enable them to meet the special needs of the children/youth placed in their home.
- Each specialized family foster parent must be at least 18 years of age at the time of application to KDHE for licensure, and have been a member of the household for at least one year prior to application.
- Each specialized family foster parent shall provide evidence of child care experience and knowledge of child care methods which will enable any child to develop his or her potential.
- The specialized family foster home shall be licensed for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the specialized foster parents' own children under 16 years of age. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children.
- Each specialized family foster parent shall be in good physical and mental health and be free from physical disabilities, as verified by a health assessment, which would interfere with the care of the children.

- The specialized family foster home shall meet the legal requirements of the community as to zoning, fire protection, water supply and sewage disposal.

### **Duties**

Services provided in a specialized family foster home include: supervision, food, shelter, age appropriate daily living skills instruction, transportation, recreation, supporting parent/child interactions (when these have not been prohibited by the court), participation in development and review of case plan tasks and objectives.

The daily schedule shall address the needs of the child and the use of time to enhance the child's physical, mental, emotional, and social development. Indoor and outdoor recreation shall be provided, and play equipment, books, and other materials shall be safe, clean, in good repair, and suitable to the developmental needs and interests of the child. The child shall attend school regularly and also have time for school and community activities. The child shall be provided opportunities to practice age appropriate daily living skills.

### **Documentation**

#### ***Child's File:***

The specialized family foster home shall maintain a file for each child in placement. The file shall contain the following information:

- Child's name and date of birth
- Name and address of the child's referring agency case manager/social worker
- Placement Agreement or Client Service Agreement (for child placed by DCF staff)
- Medical and surgical consents
- Medical and dental records
- Record of child's prescription and non-prescription medications and when administered
- Authorization for release of confidential information
- Log of critical incident reports

#### ***30-Day Progress Reports:***

Thirty-day progress reports shall document child's adjustment in the home, school performance (if school age), medical, dental, vision, and mental health appointments, critical incidents reported, interactions with parents, and any other significant events or issues related to the child and the placement.

### **Limitations**

The specialized family foster home shall be licensed for a maximum of 4 foster children, not more than 2 of whom shall be under 18 months of age, with a total of 6 children in the home including the specialized foster parents' own children under 16 years of age. Approval may be granted to care for 2 additional foster children in order to meet the needs of sibling groups or other special needs of foster children.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$53.13/day CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint. TANF

## PLACEMENT: THERAPEUTIC FAMILY FOSTER HOME

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF084</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

The over-all purpose of a Therapeutic Family Foster Home is to improve the mental health status, emotional, and social adjustment of youth who require out of home therapeutic placement. Placement in Therapeutic Foster Care (TFC) is done to support the youth, allow the youth to function in a setting outside of an inpatient hospital, or prevent the inpatient placement of the youth.

Youth placed in Therapeutic Foster Care must be in need of therapeutic intervention. Clinicians and others familiar with the youth must document that the youth is at serious risk of placement in a highly structured residential treatment program, but that the youth has enough internal control to be served in a structured family home environment by knowledgeable trained foster parents with the support of specialized behavioral management, school, and psychotherapy or behavioral therapy services.

To facilitate the process of youth in reaching the optimal functioning and ability to reside in the community in their least restrictive environment. Long term goals of the service are:

- Improve the emotional, mental, and functional status of individuals receiving services;
- Reduce unplanned placement changes;
- Increase the youth's ability to live safely, attend school, and be productive in an inclusive community environment;
- Increase the likelihood of a youth's successful return to the family or the successful implementation of permanency planning; and
- If developmentally appropriate, increase the youth's capacity for independent living.

### **Provider Minimum Qualifications**

#### **Sponsoring Agency:**

The Sponsoring Agency must be a Child Placing Agency licensed by KDHE. There must be social work staff designated by the Child Placing Agency to provide services to therapeutic family foster homes. The TFC Program must meet the National Standards of Foster Family-Based Treatment

Foster Care, in addition to the other standards listed in this document.

***Administrator:***

There shall be an administrator with a minimum of a Bachelor's Degree in Social Services or Human Services, and at least two (2) years experience in administering a child welfare service delivery program or a related program commensurate with the size and complexity of the agency; a thorough understanding of philosophy, purpose, and policy of the agency; and the capacity to provide direction and leadership of the agency.

***Supervisor:***

Each TFC program will designate supervisors for their Case Coordinators. Preferably a Supervisor will have a Master's degree in social work and a license to practice in the state of Kansas with a minimum of two years experience in the child placement field. However, a Master's degree in a related human service field can substitute for the advanced social work degree provided the Supervisor is licensed to practice in the state of Kansas and has three years of experience in the child placement field. Supervisors shall supervise no more than 5 Case Coordinators.

***Case Coordinator:***

Case Coordinators shall have a Master's degree in social work or in a related human service field and a license to practice in the state of Kansas. However, a Bachelor's degree with a license to practice in the state and at least two (2) years experience in child placement/foster care is acceptable. Case Coordinators shall be assigned no more than 8 youth in TFC homes, although, in some circumstances, exceptions can be made for the case load to increase to 12. The case load should be adjusted downward if a difficult client population requires more intensive support and contact or if the travel/distances impair the Case Coordinators ability to serve the needs of the youth or foster parents. The Case Coordinator should supervise no more than 8 TFC homes.

***Therapeutic Family Foster Parents:***

- Must be licensed as foster parents by KDHE and be sponsored by a licensed child placing agency.
- Complete the PS Model Approach to Partnerships in Parenting (PS-MAPP) preparation program. This training shall be completed prior to placement of any child in the home.
- Shall receive, after the first year, a minimum of 24 hours, per parent in the home, of additional training annually. CPR and First Aid training does not count toward meeting the minimum 24 hours of annual training per parent in the home. This training shall, at a minimum, consist of: administration of medication; orientation to mandatory abuse/ neglect reporting; DCF disciplinary policies; the management of aggressive behaviors; grief/loss issues of children in care; special issues of working with children who have emotional/behavioral problems associated with abuse/neglect or traumatic brain injury; basic training in the concepts of the various diagnostic categories affecting children placed in TFC homes; training in working with biological/adoptive families regarding issues of reintegration or dealing with resolving issues within families that prevent children from living at home; as well as the provision of self sufficiency or adult living transition skills for children who may not live with family members after treatment.

### **Duties**

The treatment program design includes a process for assuring appropriate services to a youth determined to be eligible for Therapeutic Foster Care services. The process includes:

- An initial screening by the case coordinator at the time of admission to the Therapeutic Foster Care Program (or prior to admission, if possible) to determine the needs of the youth
- A Master treatment plan to be developed within fourteen (14) days which includes input from the members of the Treatment Team and therapeutic family foster parents, as well as family involvement (unless contraindicated by legal constraints).
- The primary case coordinator will:
  - Develop the treatment plan in conjunction with the treatment team
  - Coordinate and implement the treatment plan;
  - Involve parents and family members in the treatment process, when appropriate;
  - Coordinate treatment with other involved agencies;
  - Provide training to therapeutic family foster parents on the individualized treatment plan; and
  - Observe and document implementation of each youth's individualized treatment plan, including the in-home treatment aspects utilized by the therapeutic foster parents.
  - Be available to therapeutic family foster parents 24 hours per day for crisis consultation.
  - Minimally, face to face consultation with therapeutic family foster parents and the child must be provided one time per week during the first month of placement of a child. Thereafter, face to face consultation for therapeutic family foster parents and child must be provided two times per month until the child completes the therapeutic foster care program. These, however, are minimal guidelines, and are in no way meant to reflect that only this level of support is required if there are severe problems that must be addressed. The level of case coordinator contact should be addressed in the Master Treatment Plan and should be based upon the problems that are to be treated. Weekly contact by phone must be maintained with both the therapeutic family foster parents and the child regardless of the situation.

### **Documentation**

The following shall be maintained in the case record for each youth.

***Initial Assessment-*** Prior to placement in a TFC program, a youth's strengths and needs shall be assessed. The assessment shall include but not be limited to the following: (1). Reasons for referral to the TFC program; (2) Evaluation or assessment in the areas of physical health/medication needs, family relations, academic or vocational training, community life, interpersonal interactions, daily living skills and treatment needs. (3) Establishment of a score on the placement screening tool. These assessment results will be made available to the TFC program, shall be discussed with the therapeutic family foster parents prior to agreement to accept the placement and shall be made a part of the TFC child case record.

***Master Treatment Plan-*** Each youth residing in a therapeutic family foster home must have a written treatment plan based on a thorough assessment, within 14 days of placement. Treatment Plans



must be signed by members of the treatment team and when possible the youth. The Treatment Team is composed of the Social Worker Case Coordinator, Case Coordinator Supervisor, child/youth, (if age appropriate), biological or adoptive parents (when appropriate), therapeutic family foster parents, and the therapist who is an associate of the PAHP. CWCMP/DCF/JJA Case Managers, other Clinical Consultants, and educators working with the youth in the local school district are also considered to be an integral part of the treatment team. **(NOTE: If the family is not involved in the treatment process, the reason for this must be documented in the TFC file.)**

Therapeutic family foster parents and TFC program staff must provide weekly input and feedback to the development, revision, and evaluation of the treatment plan as well as carry out the in-home strategies. Assessment documents must be included in the case record. Weekly progress notes, written by the case coordinator and therapeutic family foster parents, must be entered into the youth's chart, reflecting the delivery of services according to the treatment plan. This documentation must address the youth's responses to treatment interventions and progress of the youth on individualized goals and objectives. The note should include any significant events or critical incidents that occurred during the week and summarize contacts with family members and other involved agencies. If an unmet need is identified, the note must reflect actions to be taken to revise the plan for the youth.

The name(s) of staff responsible for meeting the youth's needs shall be recorded on the treatment plan. The Plan shall include the following:

- (1) Long term goals in the areas of physical health, family relations, and daily living skills; academic and/or vocational skills, interpersonal interactions, and community living;
- (2) Short term goals which will help a youth eventually reach his/her long term goals in each of the above areas;
- (3) Specific plans for reaching the short term goals including services to be provided and frequency;
- (4) Estimated time for reaching short term goals.

The master treatment plan shall be reviewed and revised at least each 90 days. At that time a general written quarterly progress report should be completed by the TFC program and therapist. Information obtained from the parent, guardian, referring agency and the youth shall be considered in the report and updated treatment plan.

### **Limitations**

The provider must agree that no more than two children will be cared for at any one time in each therapeutic foster home. Exceptions can be granted for the additional placement of siblings or step-siblings of the TFC youth, provided that CFS, the referring agency, and TFC program staff all agree that it is clinically good practice to do so and document the rationale for that decision in the TFC Program youth's case file.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$115.00/day CWCMP: report actual cost as "line charge" in encounter data.	IVE, SGF

## PLACEMENT: TRANSITIONAL LIVING PROGRAMS (TLP)

DCF Purchased Service		CWCMP Contract Provided Service	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required	X	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF074.1</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

Transitional living is designed for youth who are ready to enter a phase of care that will eventually transition them to independent living. Transitional living affords youth an opportunity to practice basic independent living skills in a variety of settings with decreasing degrees of supervision.

- Youth reside in apartments within one building or complex (contained apartments). Each youth must be afforded sufficient bedroom space to insure adequate privacy, safety and security.
- The provider must insure the environmental safety of the apartment is in compliance with local oversight agencies such as HUD, Fire Marshall, Municipalities, Apartment Management, etc.
- Service Access plan development, review, and case supervision are carried out by the Transitional Living provider.
- Services will be designed to work in collaboration with other community-based providers to develop a strong foundation of service and support access.
- The provider must provide assistance to ensure that youth obtain the basic necessities of daily life.
- The provider must offer or arrange for strength-based interventions to address crisis and or daily living situations.
- The provider must facilitate development of support systems to increase the youth's interdependency within the community in which they reside.
- All services accessed shall be appropriate to the age, gender, sexual orientation, cultural heritage, developmental and functional level, as well as the learning ability of each youth.
- Admission requirements shall include a list of support service needs as identified by the referring agency.

(This service code does not include Job Corp placements; see CF082 for Job Corp placements.)

### **Provider Minimum Qualifications**

Staff must meet the qualifications and responsibilities as set forth in the DCF Placement Service Standards Manual. Written job descriptions shall be developed for all staff and maintained on site where personnel

functions are carried out.

### **Administrator**

#### Qualifications

- The administrator shall have a Bachelor's degree and prior administrative experience.
- Shall not be a person restricted from working with youth as defined by K.S.A. 65-516.
- Shall have a working knowledge of adolescent development principles.

### **Case Coordinator**

#### Qualifications

- The Case Coordinator shall have at least a bachelor's degree in one of the human service fields (social work, psychology, human development and family life, criminal justice, counseling, nursing or education) and a working knowledge of adolescent development principles.
- Shall be at least twenty-one (21) years of age and at least three years older than the oldest youth served.
- Shall not be a person restricted from working with youth as defined by K.S.A. 65-516.

### **Life Coach**

#### Qualifications

- Life Coaches shall have at least a high school diploma or equivalent and have a working knowledge of adolescent development principles.
- Shall be at least twenty-one (21) years of age and at least three years older than the oldest youth served.
- Shall not be a person restricted from working with youth as defined by K.S.A. 65-516.

## **Duties**

### **Case Coordinator**

The youth to case coordinator ratio for Transitional living is no more than 1:16.

#### Responsibilities

- Service Access plan development, review, and development of collaborations with community-based service providers.
- Shall be responsible for any direct supervision of youth as required.
- Shall inspect youth's apartment as needed to insure the safety and security of youth.
- Shall coordinate or provide alternative transportation as deemed necessary.
- Shall complete paperwork or reports to referring agency as required.
- Shall work in partnership with life coaches.

### **Life Coach**

#### Responsibilities

- Shall work shifts and or be on-call 24 hours a day on a rotating basis.
- Shall be responsible for any direct supervision of youth as required.
- Shall inspect youth's apartment as needed to insure the safety and security of youth.
- Shall be responsible for the day-to-day modeling of life skills (e.g., assertiveness, communication,

conflict management, problem solving and decision making).

- Shall monitor youth's daily life skills and provide appropriate feedback.
- Shall work in partnership with the case coordinator.

## **Documentation**

### ***Chart Documentation:***

A dated record of daily observations and significant occurrences involving each youth shall be maintained. The record shall include events, which may affect the well being of the youth. The record shall be available for review. Each report shall include the date and time of occurrence, the staff member and/or youth involved, the nature of the incident and the circumstances surrounding it.

### ***Weekly Progress Notes:***

Notes shall be completed by the case coordinator and staff providing services. These notes must be entered into the youth's chart, reflecting the delivery of services according to the program plan. This documentation must address the youth's responses to interventions and the progress of the youth on individualized goals and objectives. The note should include any significant events that occurred during the week and should also summarize contacts with family members and other involved agencies. If an unmet need is identified, the note must reflect the actions to be taken to revise the plan for the youth to meet that need.

### ***Health Records:***

Records of medications shall be kept in each youth's case medical record and include: the name of the prescribing physician, the name of the medication, the dosage prescribed, the medication schedule, the purpose of the medication, noted side effects, the date of the prescription, and the date prescribed by a physician. A record of medication given, amount, date and time, and person dispensing shall be recorded. All doctor and dental visits, major illnesses, and accidents shall be recorded. Mental health appointments shall also be specifically documented in a youth's medical record. This provides for a complete Health record for the youth and their family, which documents the frequency of the youth's mental health treatment.

### ***15 and 30-Day Progress Reports:***

Within the first 15 days of the youth's admission to the TLP the Case coordinator shall provide written placement recommendations to the youth's custodial case managers as well as an update on the youth's progress. This report shall be placed in the youth's file. Thirty-day progress reports shall document progress on specific short-term goals, describe significant revisions in goals and strategies, and specify any new program goals and strategies during the period covered. The 30-day progress reports shall summarize progress and note changes regarding long-term placement and program goals and shall also be placed in the youth's file.

### ***Permanency Planning:***

Includes the evaluation and design of an approach for the youth and family that focus on opportunities for the youth to have ongoing active and meaningful connections with family, kin, relatives, and the community. The goal for achieving permanency shall be coordinated with the youth's custodial case manager. The permanency plan shall include strategies and tasks to accomplish the youth's goals.

Behaviors which place the youth at risk for disruption, activities to prepare the youth's family or kinship network for reunification, identification of other less restrictive living environments and preparing the youth for transition to these settings shall be addressed.

Record Retention: Case records, including medical records, shall be maintained 5 years from the date of the youth's discharge or until completion of an on-going audit and production of a final audit report, whichever is longer.

### **Limitations**

All youth in transitional living placements must:

- Be at least 16 years of age
- Be working towards full or part-time employment
- Be working towards a diploma or equivalent (if not already obtained)
- Have demonstrated a basic knowledge of life skills
- Youth are required to maintain a savings account to be held in trust by the TLP. Youth shall deposit the full or partial amount (depending upon their employment status) of their share of the monthly apartment rent and utilities. The youth's planning team will determine the actual amount required to be deposited in trust. These monies are then available to the youth when they leave the TLP.
- Consult the Placement Service Standards Manual for guidance.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$100.00/day (non-negotiable) CWCMP: report actual cost as "line charge" in encounter data.	SGF

## PLACEMENT: YOUTH RESIDENTIAL CARE I (YRCI)

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required	X	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF038</b>	

### **Definition**

For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A Youth Residential Care (YRC) facility is a 24-hour group home or residential facility that meets KDHE staffing and licensing requirements. It is a non-secure residential service designed to provide an environment that will enhance the youth's ability to achieve a higher level of functioning while avoiding future placement in a more highly structured treatment facility.

Population served is children and youth, ages 6 thru 22, who:

- display a need for more structure and supervision than provided in a family foster home due to behaviors which might include difficulty with authority figures, minor offenses, and difficulty in school.
- YRC I facilities may also serve those children and youth in Police Protective Custody.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Licensed by KDHE in the appropriate licensure category to cover the programming the facility will provide to the populations of children/youth whom the facility will serve.
- The facility must be staffed appropriately to meet the needs of all the residents in their care. The staff ratio is 1:7 during waking hours and 1:10 during sleeping hours. If licensened as a residential center there will be 24-hour awake staff to insure child safety.
- The facility must be staffed appropriately to meet all of the KDHE staffing requirments and the facilities staffing must be adequate to meet the needs of all the residents in their care.

### **Duties**

The range of services to be delivered by the YRC facility to meet the variety of individual needs of the residents shall be explicitly delineated. The General Program description approved by DCF Children and Family Services or JJA for each facility shall include but not be limited to the goals of the program, resident

behavioral treatment system, job descriptions (responsibilities, functions, and qualifications), policies and procedures, daily living activities, health services, recreation activities, and visitation policies.

The daily schedule shall address the needs of the residents and the use of time to enhance the resident's physical, mental, emotional, and social development. The facility shall provide supervised indoor and outdoor recreation so that every resident may participate. Age appropriate equipment to promote physical development and physical fitness shall be available. Age appropriate socialization shall be provided utilizing community fosters to assist the youth in transitioning back into their community when appropriate.

### **Documentation**

- Youth Assessments must be completed within two weeks of admittance to the program. This shall include reasons for referral to the program, evaluation of assessment in areas of (physical health, family realtions, academic/vocational training, community life, interpersoanl intreacitions, and daily living), safety risks to the youth and or community, the youth's accountability for illegal behavior and social skills the youth needs to learn in order to become law abiding (if needed).
- Program plan's must be completed for youth in placement over thirty days. The program plan shall be reviewed and documented in a progress report at least quarterly by the facility. Information obtained from the parent, guardian, or the case manager, and the youth shall be considered and indicated in the report.
- A dated record of daily observations and significant occurrences involving each youth shall be maintained. The record shall include events, which may affect the well-being of the youth. The record shall be available for review. Each report shall include the date and time of occurrence, the staff member and/or youth involved, the nature of the incident and the circumstances surrounding it.
- Records of medications shall be kept in each youth's case medical record and include: the name of the prescribing physician, the name of the medication, the dosage prescribed, the medication schedule, the purpose of the medication, noted side effects, the date of the prescription, and the date prescribed by a physician. A record of medication given, amount, date and time, and person dispensing shall be recorded. All doctor and dental visits, major illnesses, and accidents shall be recorded. Mental health appointments shall also be specifically documented in a youth's medical record. This provides for a complete Health record for the youth and their family, which documents the frequency of the youth's mental health treatment.

#### *Record Retention:*

Case records, including medical records, shall be maintained 5 years from the date of the youth's discharge or until completion of an on-going audit and production of a final audit report, whichever is longer.

### **Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$59.93/day (non-negotiable) CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint. TANF

## PLACEMENT: YOUTH RESIDENTIAL CARE II (YRCII)

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> ○ in-home    ● out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required	X	<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF085</b>	

### **Definition**

*For a complete, up-to-date description of this placement type, refer to DCF Placement Service Standards Manual located at*

<http://www.dcf.ks.gov/services/PPS/Documents/CWHandbookofServices/PlacementServiceStandardsManual.pdf>

A Youth Residential Care (YRC) facility is a 24-hour residential facility that meets KDHE's Residential Center staffing and licensing requirements. It is a non-secure residential service designed to provide an environment that will enhance the youth's ability to achieve a higher level of functioning while avoiding future placement in a more highly structured treatment facility.

The purpose of placement in an YRC II is to improve the youth's decision making, coping skills, social skills, and to address any underlying problems which are effecting the youth, while teaching the youth how to handle their behaviors in order to transition successfully back into their family or community.

Population served is children and youth, ages 6 thru 22, who:

- have a well established pattern of behavior or conduct which is antisocial, oppositional, defiant, aggressive, abusive, impulsive or high risk in nature.
- YRC II facilities may also serve those children and youth in Police Protective Custody.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Licensed by KDHE in the appropriate licensure category to cover the programming the facility will provide to the populations of children/youth whom the facility will serve.
- Case Coordinator - The youth to case coordinator ratio in a YRC II is 1:16. The Case Coordinator shall have at least a bachelor's degree in one of the human service fields (social work, psychology, human development and family life, criminal justice, counseling), nursing, or education.
- Administrator - The administrator shall have a Bachelor's degree, prior administrative experience and a working knowledge of child development principles.
- Facility Child Care Staff - Child care staff shall have at least a high school diploma or equivalent and shall practice accepted methods of child care. Facility staff must be trained to effectively meet the special needs of youth who require this level of care. Facility child care staff shall be at least 21 years



of age with a minimum of three years age difference between the child care worker and oldest residents who can be admitted to the facility. Childcare workers must possess a high school diploma or GED and must have completed 32 hours of in-service training provided by the facility before they can function independently.

- The facility must be staffed appropriately to meet the needs of all the residents in their care. The staff ratio is 1:7 during waking hours and 1:10 during sleeping hours. To insure child safety, the YRC II facility will have awake staff 24 hours a day.

### **Duties**

The range of services to be delivered by the YRC facility to meet the variety of individual needs of the residents shall be explicitly delineated. The General Program description approved by DCF Children and Family Services or JJA for each facility shall include but not be limited to the goals of the program, resident behavioral treatment system, job descriptions (responsibilities, functions, and qualifications), policies and procedures, daily living activities, health services, recreation activities, and visitation policies.

The daily schedule shall address the needs of the residents and the use of time to enhance the resident's physical, mental, emotional, and social development. The facility shall provide supervised indoor and outdoor recreation so that every resident may participate. Age appropriate equipment to promote physical development and physical fitness shall be available. Age appropriate socialization shall be provided utilizing community resources to assist the youth in transitioning back into their community when appropriate.

### **Documentation**

#### ***Chart Documentation:***

A dated record of daily observations and significant occurrences involving each youth shall be maintained. The record shall include events, which may affect the well-being of the youth. The record shall be available for review. Each report shall include the date and time of occurrence, the staff member and/or youth involved, the nature of the incident and the circumstances surrounding it.

#### ***Weekly Progress Notes:***

Notes shall be completed by the case coordinator and staff providing services. These notes must be entered into the youth's chart, reflecting the delivery of services according to the program plan. This documentation must address the youth's responses to interventions and the progress of the youth on individualized goals and objectives. The note should include any significant events that occurred during the week and should also summarize contacts with family members and other involved agencies. If an unmet need is identified, the note must reflect the actions to be taken to revise the plan for the youth to meet that need.

#### ***Health Records:***

Records of medications shall be kept in each youth's case medical record and include: the name of the prescribing physician, the name of the medication, the dosage prescribed, the medication schedule, the purpose of the medication, noted side effects, the date of the prescription, and the date prescribed by a physician. A record of medication given, amount, date and time, and person dispensing shall be recorded. All doctor and dental visits, major illnesses, and accidents shall be recorded. Mental health appointments shall also be specifically documented in a youth's medical record. This provides for a

complete Health record for the youth and their family, which documents the frequency of the youth's mental health treatment.

***30-Day Progress Reports:***

Thirty-day progress reports shall document progress on specific short-term goals, describe significant revisions in goals and strategies, and specify any new program goals and strategies during the period covered. The 30-day progress reports shall summarize progress and note changes regarding long-term placement and program goals.

***Permanency Planning:***

Includes the evaluation and design of an approach for the youth and family that focuses on opportunities for the youth to have ongoing active and meaningful connections with family, kin, relatives, and the community. The goal for achieving permanency shall be coordinated with the youths custodial case manager and be included in the program plan to be reviewed every 30 days. The permanency plan shall include strategies and tasks to accomplish the youth's goals. Behaviors which place the youth at risk for disruption, activities to prepare the youth's family or kinship network for reunification, identification of other less restrictive living environments and preparing the youth for transition to these settings shall be addressed.

Record Retention: Case records, including medical records, shall be maintained 5 years from the date of the youth's discharge or until completion of an on-going audit and production of a final audit report, whichever is longer.

**Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$126.00/day (non-negotiable) CWCMP: report actual cost as "line charge" in encounter data.	Title IV-E Maint. TANF

## PSYCHOLOGICAL TESTING

DCF Purchased Service		CWCMP Contract Provided Service	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

The use of established psychological tests, procedures, and techniques with the intent of assessing and evaluating a child's intellectual, emotional, cognitive, and social functioning. The results of such testing are used to diagnose problems and establish treatment plans.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Master's Level Psychologist, or
  - Ph.D. Level Psychologist,
- And

Be enrolled as, or employed by, an approved Medicaid provider.

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- Administer psychological tests as needed,
- Interpret completed tests,
- Identify presenting problems and reason for referral,
- Describe the child's functioning at the time of testing,
- Define the need for initiating/continuing intervention and/or treatment, and
- Provide written reports of findings, observations, and recommendations.

### **Documentation**

Each service provider shall maintain at minimum, the following documentation:

- Description of the service provided,
- Date and time the service was provided, and
- Total time spent providing the service.

### **Limitations**

Four hours every two-year period

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$76/hour (This is the Medicaid approved rate; DCF can not pay more than this rate.)	Medical card, SGF

## RESPITE CARE

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
X	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> • in-home    • out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF015</b>	

### Definition

Temporary care of the child in a setting providing 24 hour care to give relief to the family.

### Provider Minimum Qualifications

Providers of this service must, at minimum, meet the following qualifications:

- Pass KBI and Child Abuse Registry Check, Adult Abuse Registry, and Motor Vehicle screens, and
- Homes must be KDHE licensed or approved as a Family Foster Home.

### Duties

Each service provider shall perform, at minimum, the following duties:

- Provide minimally sufficient care and supervision, including but not limited to, food, shelter, daily care, guidance and nurturance, and necessary transportation.

### Documentation

Each service provider shall maintain, at minimum, the following documentation:


- Description of the placement,
- Dates of placement,
- Placement location, and
- Name of the facility.

### Limitations

Seven consecutive days per episode of care.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
daily	\$32.66/day CWCMP: report actual cost as “line charge” in encounter data.	SGF, TANF

## SERVICE COORDINATION - FAMILY SERVICE

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase		<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>

### **Definition**

Coordination of planning and assisting families in accessing services to successfully achieve case plan goals. Service may include assisting and supervising child/parent visitation.

### **Provider Minimum Qualifications**

Providers of this service must, at minimum, meet the following qualifications:

- Provider must have experience in providing family support services,
- Supervision of support workers will be provided by staff possessing a Human Services Degree with knowledge or experience in family preservation services, and
- Employees hired to provide this service must meet the following qualifications:
  - Be at least 18 years of age with a minimum of three years age span between workers and clients youth,
  - High school diploma or equivalent,
  - Pass KBI, DCF Child Abuse Registry, Adult Abuse Registry, and Motor Vehicle screens,
  - Documentation showing that the agency provided training pertaining to the dynamics and indicators of child abuse/neglect,
  - Letter(s) of reference showing good communication skills, the ability to follow instructions, and the ability to listen and be non-judgmental,
  - Negative TB skin test, and
  - Possess valid driver's license and necessary automobile insurance.

### **Duties**

Each service provider shall perform, at minimum, the following duties:

- Coordinate with the various agencies, the obtaining of services identified in the Client Service Agreement,
- Provide and follow-up on client referrals,
- Regularly reassess the client's needs in light of services provided,
- Provide crisis intervention services to clients,
- Participate in case planning conferences, and
- Provide services in the client's home.

### **Documentation**

Each service provider shall maintain, at minimum, the following documentation:

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

Daily contact logs which include:

- Name of individual receiving services,
- Description of the service provided,
- Date the service was provided,
- Name of the person providing the service,
- Units of service provided, and
- Written reports submitted as specified in the Client Service Agreement.

**Limitations**

This service has no limitations.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
hourly	\$30.00/hour	SGF

## WORKER/CHILD VISITS

<u>DCF Purchased Service</u>		<u>CWCMP Contract Provided Service</u>	
	<b>Provider Agreement Required</b> for DCF to purchase	X	<b>Responsibility of CWCMP Contracts</b> <input type="radio"/> in-home <input checked="" type="radio"/> out-of-home    services
	<b>DCF can purchase without PA</b> ; CSA required		<b>Provider Agreement Required</b> for residential rate sheet <sup>1</sup>
		for encounter data report: <b>CF065.1</b> - visits in child's residence <b>CF065.2</b> - visits not in child's residence	

### Definition

Children who are in foster care need to have regular contact with their caseworker. Foster care is defined as “24-hour substitute care for children placed away from their parents or guardians and for whom the State agency has placement and care responsibility.” A caseworker is defined as a person handling the case of the child. Since cases are assigned to a CWCMP team consisting of a case manager and paraprofessional, either can be considered someone who handles the case. The visits must be well planned and focused on the child's safety and well-being, as well as permanency, and address issues such as: the relationship and communication between the caseworker and the child; case planning; the physical, mental health, and educational needs of the child; the child's visits and relationships with parents, siblings, other relatives, and foster care provider; service delivery; and goal attainment/progress of the child. The visits shall occur on at least a monthly basis. Monthly basis is defined as “one face to case visit per calendar month.” Any visits occurring during partial months of care should not be reported. The months children are in AWOL status would not be reported.

### Provider Minimum Qualifications

Providers of this service must be employed, or be subcontracted with, one of our current CWCMP contract providers.

### Duties

The caseworker shall visit the child on a monthly basis. The majority of the visits shall occur in the residence of the child. Activities of the worker include observation, assessments, interviews and discussions with the child, if age appropriate. Whenever possible, the caseworker/child visits will occur without others being present. There may be times when the child requests that another person be present, such as a sibling or resource parent. If the child is not verbal, the caseworker may gather information from the foster care provider as long as there is a direct observation of the child. For children placed in another state, the receiving state worker will be informed of the above duties through a cover letter included in the ICPC packet, and documentation shall be included in the quarterly reports.

### Documentation

Plans for required interactions between the worker and child shall be documented on form CFS 3050F-2, Visitation Plan in the section for worker/child visitation, and the primary contact shall be listed.

PPS - Appendix EP-E  
Operations – Appendix B  
Updated 01/01/2013

Caseworker/child visits shall be documented in the case file as occurring. An encounter data code has been created for these visits, and they shall be included in the monthly submission of encounter data to CFS.

The caseworker/child visit documentation in the file shall include:

- the date, time and duration of the visit
- observations of the child and what was discussed
- who was present for the visit
- where the visit took place

**Limitations**

- At a minimum, one face-to-face visit between the child and caseworker shall occur monthly.

Units of Services	Suggested Rate <sup>2</sup>	Funding Source
each	not applicable	not applicable



**Footnote Key**

<sup>1</sup>Send Provider Worksheet, Appendix C, to DCF Contracting.

<sup>2</sup>Rate may be determined according to local area need and budget and must be specified in the Local Addendum.

In the interest of keeping rates as consistent as possible across the state, local areas entering into agreement for this service are asked to check the provider agreement database to see if other areas have an existing agreement and to check the rate being paid for the services.